

California Department of Corrections and Rehabilitation

Office of Audits and Compliance



Operational Peer Review

Ironwood State Prison

April 1 through April 11, 2008

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OFFICE OF AUDITS AND COMPLIANCE

IRONWOOD STATE PRISON

EXECUTIVE SUMMARY

The Office of Audits and Compliance, in conjunction with various teams, conducted an audit of Administrative Segregation Due Process, Business Services, Information Security, Inmate Education Programs, Inmate Appeals, [REDACTED], Administrative Segregation Bed Utilization, and Radio Communication, [REDACTED] Case Record, and [REDACTED] at Ironwood State Prison (ISP) from April 1 through April 10, 2008. The purpose of the audit was to determine ISP's compliance with State, federal, and departmental rules, regulations, policies, and procedures.

Preliminary audit reports were prepared for each of the audited areas. This executive summary identifies the significant issues identified in each of the preliminary reports. For more information on the areas of interest, please see the detail preliminary report. The Office of Audits and Compliance requested that ISP provide a corrective action plan (CAP) 30-days from the date of the Preliminary report.

A summary of the significant issues is as follows:

Administrative Segregation and Due Process

ISP was in compliance with 58 (87 percent) of the 67 ratable areas. Three areas were found to be not ratable during this review.

- **Exercise.** The review revealed that ISP's Administrative Segregation (Ad Seg) units provide controlled compatible, reintegrated mixed and walk-alone yard group designations. The controlled compatible and reintegrated mixed yard group designations in Ad Seg is offered 3 exercise periods per week, 3.5 hours per period, for a total of 10.5 hours of outdoor exercise. However, inmates assigned to the walk-alone yard group designation are not receiving the required 10 hours of outdoor exercise per week.
- **The Inmate Segregation Profile (CDC 114-A1) Documents Yard Group Designation.** The review team reviewed a random sample of 20 CDC 114-A1s. Of the 20 CDC 114-A1s reviewed, 1 was not ratable as the inmate had not yet been to Institution Classification Committee (ICC). Of the 19 ratable CDC 114-A1s, 13 (68 percent) documented the inmate's current yard group designation.
- **The CDC 114-A1 is Updated Every 90-Days.** The review revealed that in a random sample of 20 CDC 114-A1s, 13 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require a 90-day update. Of the 7 ratable CDC 114-A1s reviewed, 2 (29 percent) were updated as appropriate.
- **Administrative Review.** Of the 30 records reviewed, 20 (67 percent) contained documentation of a placement review by a Captain within the first working day

following the inmate's placement in Ad Seg. Of the 10 remaining records, 5 documented a late review by a Captain (1 to 3 days late) and 5 records documented a late countersignature by an Associate Warden when the review was conducted by an acting Captain (1 to 3 days late).

- **Witnesses on the Administrative Segregation Unit Placement Notice (CDC 114-D).** Of the 30 records reviewed, 18 (60 percent) contained documentation regarding the need for witnesses. The 12 remaining records left this section blank.
- **Inmate Waiver.** Of the 30 records reviewed, 17 (57 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. The 13 remaining records left this section blank.
- **Classification within Ten Days.** Of the 30 records reviewed, 25 (83 percent) contained documentation of an ICC review within 10 days of an inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented the hearing was not held within the required time frame (2 to 10 days late) and 1 record did not document that an initial hearing had been held on a reissued CDC 114-D.
- **Post Order—Signatures.** The review revealed there are 39 identified staff who are assigned to 33 Ad Seg unit posts. Of the 47 required signatures, 25 (53 percent) were present acknowledging the understanding of the post orders.
- **Post Orders—Supervisor.** The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

Business Services

Personnel:

- Based on the March 24, 2008, Vacancy Report, there are 58 Correctional Officers paid out of the 918 blanket. However, the Institution only has 28 vacant positions of which 10 are fractional.
- Probation Reports and Individual Development Plans (IDP) are not prepared by supervisors for employees under their supervision. As of April 10, 2008, there are 515 reports outstanding that were due by January 31, 2008.
- Organizational Charts for Business Services are not always accurate. For example, the position numbers displayed as vacant are often filled and vice versa.
- The attendance records do not reflect accurate time used. Also, the Personnel Post Assignment System (PPAS) does not reflect the changes made to leave credits used when an employee opts to use leave credit instead of dock.
- Twenty-one Leave Buy Back payments were issued out of the 912 blanket instead of the 669 blanket serial number.

- The Periodic Position Control Report, dated March 1, 2008, notes 33 positions, of which 17 of are over expended. In addition, three fractional positions have been over expended.

Health and Safety:

- The ISP Business Plan is not current, complete, neither approved nor signed by the Warden since 2001 or 2004. There are also multiple versions.
- There are deficiencies regarding the Hazardous Communication Program at 9 locations. A common deficiency found at 8 of the 9 locations is inadequate indexing and updating of Material Safety Data Sheets (MSDS).
- There were three deficiencies at the Hazardous Waste storage site:
 - Accumulation dates on the Fixer/Developer container exceeded the 90 day storage limits.
 - A pallet of waste paints was left outside the storage area without Waste labels or accumulation start dates.
 - Waste paint containers were placed in drums without lids.
- It does not appear that a complete and comprehensive IIPP was established. The following eight elements should be included in the IIPP, Responsibility, Compliance, Communication, Hazard Assessment, Accident/Exposure Investigation, Hazard Correction, Training and Instruction, and Recordkeeping.
- ISP's written site specific Exposure Control Plan (ECP) was not updated since 2003. The updates should include but not limited to the current post exposure providers, locations of Personal Protective Equipment (PPE) and Infection control practice and/or policy and procedures for handling soiled linen.
- The system for identifying and communicating work place hazards is not in place in accordance to the ISP-IIPP. Staff is not supplied with access to current hazard information pertinent to their work assignments. We noted that the Codes of Safe practices and Hazard Evaluations are incomplete. They are missing the date prepared and the name and title of the preparer.
- A sharps container for the disposal of bio-hazardous waste is not easily accessible in the A facility clinic.

Plant Operations:

- Completed work orders are not reviewed and turned in to the SAPMS coordinator in a timely manner. In addition, there is a backlog of over 2100 work orders that have been outstanding for over 90- days.
- The Plant Operations Maintenance Report (POM) does not accurately reflect plant operations activities. For example, total hours are understated by 5000 hours for the period of September 2007 through March 2008. The POM is not reviewed by

management. Additionally, there is 2700 hours of overtime for a total of \$116,453 that is not reflected in the POM.

Prior Findings:

- **Non-Drug Medical**

The non-drug medical warehouse has the following deficiencies:

1. Inventory reconciliations are not performed.
2. Stock records are not maintained.
3. Access is not adequately controlled.
4. Separation of Duties is inadequate.

- **Food Services**

The following deficiencies were noted related to inmate timekeeping in the Main Kitchen, and Facilities B, C, and E:

- Inmates are not signed in/out when their shift is beginning and ending
- The CDCR 1697 are incomplete. They are missing the transfer in/out dates and the Daily Movement Sheet (DMS) number.
- Exceptional time is not noted.

Temperature logs are not maintained for the Central Kitchen scullery.

Information Security

Staff Computing Environment:

- Use Agreements are not on file.
- Information security training is not current.
- Network access authorization is not on file.
- Physical locations of CPUs do not agree with the inventory records.
- Staff CPUs are not labeled "No Inmate Access".
- Staff monitors are visible to inmates.
- Anti virus updates are not current.
- Security patches are not current.

Inmate Computing Environment:

- Physical locations of CPUs do not agree with the inventory records.
- CPUs are not labeled as inmate computers.
- Anti virus updates are not current.
- Inmate monitors are not visible to the supervisor.
- Portable media is not controlled.
- Telecommunications access is not restricted.
- Operating system access is not restricted.
- Printer access is not restricted.

Inmate Education Programs

Education Administration: The Alternative Education Delivery Models (AEDM) was not implemented. The school is not in compliance with Suzan Hubbard's memo dated May 5, 2005, requiring AEDM implementation. For the Bridging Education Program (BEP), eligible inmates are not receiving an education orientation packet upon arrival at

the ISP. For the high school credit program, there is no high school credit program and no high school credits are issued to students who earn them.

Five academic files were randomly selected and audited. The first file had two different inmates with the same last name and different California Department of Corrections and Rehabilitation numbers records mixed in the same file. The second file was not updated for more than a year. The final three files were blank except for the student's name and number. More information should be in the files since the students were assigned for more than four months.

Academic Education: Most teachers did not issue Certificates of Achievement or Completion. Most teachers are not aware of the policy regarding the issuance of certificates. The required elective credits were not issued to inmates and recorded on the transcript because the teachers had no knowledge or understanding of the process and did not know that they could issue credits for completed work.

The Test of Adult Basic Education (TABE) locator test is not used when needed to determine the appropriate level test to administer. Most teachers interviewed did not know about it or its purpose. Some teachers were aware of it but did not know they could use it. Part of the teachers assigned to test students never used the locator test. There are many student files with outdated subtests results posted.

The AEDM Distance Learning program is not adequate. The Distance Learning teacher spends 100 percent of the time working with corresponding college students; and not with the primarily funded and approved Office of Correctional Education curriculum classes such as Adult Basic Education I, II, III, General Education Development, high school, etc. Therefore, the teacher did not issue certificate of completions to AEDM students. Teachers are not testing inmates within ten days of being enrolled or assigned to AEDM. Common practice is to hold students until a teacher can test a group of students. This practice is not approved.

Vocational Education: The teachers are unaware that credits can be issued to students and recorded on their transcripts. Only 9 computers are available for 27 students in each of the four Office Services programs. Three of the programs did not have any of the software required. Without computers and software, it is extremely difficult to provide vocational training for the inmates assigned to the programs.

Not all of the National Center of Construction Education and Research instructors have resources needed to effectively teach the related trades. Most of the teachers did not have a staff computer to generate the testing and documentation needed using the National Center for Construction Education and Research curriculum guide lines. Fifty percent of the overhead lights are burned out in the Air Conditioning/Refrigeration class on "B" yard. Most of the vocational classes have inadequate lighting in their shop areas. The lack of proper lighting could pose safety issues to staff and inmates when working with equipment and on projects.

For the TABE, the locator test is not used when needed to determine the appropriate level test to administer. Most teachers were unaware of the TABE locator test or its use. Some test scores seem to indicate that the wrong TABE test level was administered. By administering the TABE locator test the appropriate test level can be

determined. Very few student files had copies of the TABE subtests. Most subtests were in a separate binder in the teacher's office. Some teachers did not have the subtest copies. They did not know they were to keep them.

Inmate Appeals

Training: There is no evidence that Appeals Coordinator actively participates and works with the In-Service Training officer to ensure that training on the appeals procedure is carried out. Additionally, there is no evidence that the Inmate Appeals training is provided to new supervisors during the Supervisors Orientation.

Timeframes: The first-level responses to appeals are not completed within 30 working days.

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Administrative Segregation Bed Utilization

This review is presented in three separate case groups (i.e. Disciplinary, Safety Concerns Investigation, Prison Gang Investigation).

Of the 64 cases reviewed, approximately 31 (or 48 percent) were presented to the Classification Services Representative (CSR) beyond 30 days from the date of initial ICC ASU retention review; 1 was presented to CSR almost 9 months after Administrative Segregation Unit (ASU) placement; and 5 have not been presented to a CSR to date (between 4-7 months). An additional problem is that cases required to be

returned to CSRs for further action(s) were not regularly returned to CSRs before the expiration of a specifically given return date. Of the cases reviewed, only 11 were re-presented to CSRs on or prior to the approved return dates and approximately 6 were re-presented to CSR beyond the approved return dates by approximately 3 to 4 months.

Disciplinary Process: It appears the information regarding an inmate's decision to postpone or not to postpone the hearing and the progress of the District Attorney referral was not regularly documented in the CDC 128-Gs or in any other forms in the Central File. It would be beneficial to the classification review process if classification staff coordinate with ISU in obtaining information regarding the status of these cases for inclusion in the CDC 128-Gs.

Safety Concern Investigations: Staff appeared to experience similar problems in this area. Information regarding the status of such investigations was rarely sufficiently documented in the CDC 128-Gs. The time taken to complete the investigations or to schedule ICC reviews following conclusion of the investigations may also have been an issue. Of the 12 Safety Concern cases reviewed, 4 (or 33 percent) required staff to spend between 44 to 96 days to complete the investigations and 3 (or 25 percent) appeared before ICC between 50-99 days following conclusion of the investigations.

Of the 62 cases reviewed, 22 (or 35 percent) were presented to CSR beyond 30 days from the date of initial ICC ASU retention review, and 2 were never made it to a CSR. An additional problem is that cases required to be returned to CSRs for further action(s) were not regularly returned to CSRs before the expiration of a specifically given return date. Approximately 49 (or 79 percent) of the 62 cases reviewed were re-presented to CSRs beyond the approved return dates. Seven cases exceeded the return date by approximately 4 to 9 months.

Prison Gang Investigation:

ASU Placement to Referral to IGI for Investigation:

Time from the day of ASU placement to the investigation assignment being received by IGI ranged from **0** day to **70** days. The average time is **26** days.

(There was 1 case in which the investigation was initiated at the same time as ASU placement.)

Initiation of IGI investigation to Conclusion of Investigation:

Time from the day of IGI investigation assignment to conclusion of the investigation ranged from **15** days to **364** days. The average time is **135** days.

Radio Communication

The review covered 28 different areas. ISP was compliant in 20 areas that were applicable to the ISP institution. The remaining 8 areas are shared with Chuckawalla Valley State Prison (CVSP) because both institutions share the same radio vault system. CVSP maintains, monitors, and controls all access and security measures. ISP has no issues with usage of the 800 MHz Trunked Radio System and all ISP staff are following all required Public Safety Standards.

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Case Records

Holds, Warrants and Detainers: Nineteen components were reviewed. There were five areas listed below that need to be brought into compliance with the current policies and procedures.

- Time frames between initiating the CDC 850 and forwarding the inquiry to the appropriate law enforcement agency are not within guidelines.
- Time frames for placing active holds and warrants into the KCHD system do not meet Departmental policy and procedures.
- There is no documentation of the CDC 801 being prepared and given to the agency when picked up prior to the inmate's release date.
- The appropriate agency issuing the warrant is not listed on the CDC 661.

- Holds are not being dropped in the KCHD system after the inmate is released on parole.

Warden's Checkout Order (CDC Form 161): There are four areas listed below that need to be brought into compliance with the current policies and procedures.

- The Notices Sent Pursuant to PC 3058.6, PC 3058.8, etc., on the CDC Form 161 Warden's Checkout Order need to include N/A, not applicable for those that do not apply.
- The desk procedures are not consistent with the current practices.
- The early/late release reports are not being submitted in a timely manner.
- Information on the CDC 161 is not being verified for accuracy.

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CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION
AND
DUE PROCESS

IRONWOOD STATE PRISON

APRIL 1 THROUGH APRIL 11, 2008



PRELIMINARY

CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

**CALIFORNIA DEPARTMENT OF CORRECTIONS AND
REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE**

PROGRAM COMPLIANCE REVIEW

**ADMINISTRATIVE SEGREGATION
UNIT REVIEW**

Ironwood State Prison



COMPLIANCE/PEER REVIEW BRANCH

April 1-4, 2008

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Review of Administrative Segregation and Due Process

Ironwood State Prison

INTRODUCTION

This review of administrative segregation (Ad Seg) operations and due process provisions at the Ironwood State Prison (ISP) was conducted by the Compliance/Peer Review Branch, Office of Audits and Compliance (OAC), between the dates of April 1-4, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation's (CDCR) Department Operations Manual (DOM), CDCR's Use of Force Policy, Administrative Bulletins (AB) 95/3R and 99/03, and Information Bulletins (IB) as the primary sources of operational standards. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** were used in this review as a benchmark for litigation avoidance.

This review was conducted by Tony Alleva, Facility Captain; Dave Stark, Correctional Counselor (CC) II; Michael Brown, Correctional Lieutenant; Chuck Lester, Correctional Lieutenant; and Nancy Fitzpatrick, Associate Governmental Program Analyst, of the OAC.

The review consisted of an on-site inspection, interviews with staff and inmates, reviews of procedures and other documentation, and observation of institutional operations.

The purpose of the OAC review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations and court-established standards.

Each area was reviewed by a minimum of two primary reviewers and cross-verified by other members of the team as possible. Overall, findings presented in the attached report represent the consensus of the entire review team.

Review of Administrative Segregation and Due Process

Ironwood State Prison

REVIEW SCOPE AND METHODOLOGY

The OAC conducted an on-site review at ISP during the period of April 1-4, 2008. The purpose of this review was to assess the level of compliance with established State regulations and court-established standards in the areas of Ad Seg operations and due process provisions. This review and the attached findings represent the formal review of ISP's compliance by OAC.

The scope and methodology of this review was based upon written review procedures developed by OAC and provided to ISP's staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process.

For the purposes of this review, facilities were toured by members of the review team, cell and tier inspections were conducted in the unit, and randomly selected inmates were informally interviewed based upon their interest and willingness to talk to the reviewers.

Throughout the tour, on-duty staff at all levels (medical, counseling, management, administration, custody, and non-custody) were interviewed regarding current practices.

A random sample of 30 central files was reviewed. Utilizing "point-in-time" methodology, files were evaluated against all administrative requirements pertaining to the documents contained in those files.

Review of Administrative Segregation and Due Process

Ironwood State Prison

EXECUTIVE SUMMARY

During this formal review of compliance with State regulations and court-established standards regarding Ad Seg operations and due process provisions at ISP, the Facility was found to be in compliance with 58 (87 percent) of the 67 ratable areas. Three areas were found to be not ratable during this review.

Discrepancies were found in the following areas:

- **Exercise.** The review revealed that ISP's Ad Seg units provide controlled compatible, reintegrated mixed and walk-alone yard group designations. The controlled compatible and reintegrated mixed yard group designations in Ad Seg are being offered 3 exercise periods per week, 3.5 hours per period, for a total of 10.5 hours of outdoor exercise. However, inmates assigned to the walk-alone yard group designation are not receiving the required 10 hours of outdoor exercise per week.
- **The Inmate Segregation Profile (CDC 114-A1) Documents Yard Group Designation.** The review team reviewed a random sample of 20 CDC 114-A1s. Of the 20 CDC 114-A1s reviewed, 1 was not ratable as the inmate had not yet been to ICC. Of the 19 ratable CDC 114-A1s, 13 (68 percent) documented the inmate's current yard group designation.
- **The CDC 114-A1 is Updated Every 90 Days.** The review revealed that in a random sample of 20 CDC 114-A1s, 13 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require a 90-day update. Of the 7 ratable CDC 114-A1s reviewed, 2 (29 percent) were updated as appropriate.
- **Administrative Review.** Of the 30 records reviewed, 20 (67 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 10 remaining records, 5 documented a late review by a Captain (1 to 3 days late) and 5 records documented a late countersignature by an Associate Warden when the review was conducted by an acting Captain (1 to 3 days late).
- **Witnesses on the Administrative Segregation Unit Placement Notice (CDC 114-D).** Of the 30 records reviewed, 18 (60 percent) contained documentation regarding the need for witnesses. The 12 remaining records left this section blank.

- **Inmate Waiver.** Of the 30 records reviewed, 17 (57 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. The 13 remaining records left this section blank.
- **Classification within Ten Days.** Of the 30 records reviewed, 25 (83 percent) contained documentation of an ICC review within 10 days of an inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented the hearing was not held within the required time frame (2 to 10 days late) and 1 record did not document that an initial hearing had been held on a reissued CDC 114-D.
- **Post Order—Signatures.** The review revealed there are 39 identified staff who are assigned to 33 Ad Seg unit posts. Of the 47 required signatures, 25 (53 percent) were present acknowledging the understanding of the post orders.
- **Post Orders—Supervisor.** The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

A complete description of these finding areas may be found in the narrative section of this report.

Review of Administrative Segregation and Due Process

Ironwood State Prison

SUMMARY CHART (SYMBOL DEFINITIONS)

The following chart represents individual review findings in relation to the CCR, Title 15, DOM, PC, and ABs. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** are being used in this review as a benchmark for litigation avoidance.

Each of the items is rated as to whether or not the Institution is in compliance. The chart utilizes the following symbols to denote compliance ratings:

SYMBOL	DEFINITION
Compliance (C):	The requirement is being met.
Partial Compliance (P/C):	The institution is clearly attempting to meet the requirement, but significant discrepancies currently exist.
Noncompliance (N/C):	The institution is clearly not meeting the requirement.
Not Applicable (N/A):	Responsibility for compliance in this area is not within the authority of this institution.
Not Ratable (N/R):	No measurable instances.

At the end of the chart is a Comparative Statistical Summary Chart of Review Findings. This summary presents a mathematical breakdown of compliance by total items and percentages (%).

Review of Administrative Segregation and Due Process

Ironwood State Prison

COMPLIANCE RATING BY SUBJECT AREA

SECTION REVIEWED	NO. OF ITEMS REVIEWED	NO. IN COMPLIANCE	SECTION SCORE
Conditions of Segregated Housing	30	27	90%
Due Process	22	18	82%
Administration	10	8	80%
Use of Force	8	8	100%

Review of Administrative Segregation and Due Process

Ironwood State Prison

SUMMARY CHART

REVIEW STANDARD	REVIEW FINDING 2/07	REVIEW FINDING 4/08	PAGE NO.
I. CONDITIONS OF SEGREGATED HOUSING			
1. Living Conditions.	C	C	
a. Housekeeping and Maintenance.	C	C	
b. Vector Control.	C	C	
2. Restrictions.	C	C	
3. Clothing.	C	C	
4. Meals.	C	C	
5. Mail.	C	C	
6. Visits.	C	C	
7. Personal Cleanliness.			
a. Showering.	C	C	
b. Haircuts.	C	C	
c. Laundry Items.	C	C	
8. Exercise.	P/C	P/C	
9. Reading Material.	C	C	
10. Rule Changes.	C	C	

REVIEW STANDARD	REVIEW FINDING 2/07	REVIEW FINDING 4/08	PAGE NO.
11. Telephones.	C	C	
12. Institution Programs and Services.	C	C	
13. Visitation and Inspection.	C	C	
a. Medical Attention.	C	C	
14. Management Cells.			
a. Placement.	P/C	N/R	
b. Reporting.	P/C	N/R	
c. Transfer.	P/C	N/R	
15. Access to the Courts.	C	C	
16. Isolation Log Book (CDC 114).	C	C	
17. Inmate Daily Segregation Record (CDC 114-A).			
a. All significant information documented.	C	C	
b. The CDC 114-A1 notes yard group designation.	C	P/C	
c. The CDC 114-A1 notes special information.	C	C	
d. The CDC 114-A1 is updated every 90 days.	P/C	N/C	
18. Safety.			
a. Fire Safety.	C	C	
b. Quarterly Fire Drills.	P/C	C	
c. Documentation.	C	C	

REVIEW STANDARD	REVIEW FINDING 2/07	REVIEW FINDING 4/08	PAGE NO.
II. DUE PROCESS			
1. Authority.	C	C	
2. Written Notice.	C	C	
3. Receipt of the CDC 114-D.	C	C	
4. Confidential Material.	C	C	
5. Review.	C	P/C	
a. Staff Assistance.	C	C	
b. Witnesses.	P/C	P/C	
c. Inmate Waiver of Time Limitations.	N/C	P/C	
d. Hearing Time Constraints.	C	C	
e. Decision.	C	C	
6. Hearing within 10 Days.	C	P/C	
a. Determinations documented on the CDC 128-G.	C	C	
b. Hearing Date.	C	C	
c. Inmate Presence.	C	C	
d. Hearing Officer.	C	C	
e. SA/IE on CDC 128-G.	P/C	C	
f. Witnesses on CDC 128-G.	P/C	C	
g. The CDC 128-G notes yard group designation.	C	C	

REVIEW STANDARD	REVIEW FINDING 2/07	REVIEW FINDING 4/08	PAGE NO.
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h. Cell Status.	C	C	
i. Participation.	C	C	
7. Classification Review.	C	C	
8. Classification Staff Representative (CSR) Review.	C	C	

III. ADMINISTRATION			
1. Training.	C	C	
2. The Institutional Classification Committee (ICC).	C	C	
3. Record of Disciplinary.	C	C	
4. Post Orders - Firearms.	C	C	
5. Post Order - Job Site.	P/C	C	
6. Post Orders—Signatures.	P/C	P/C	
a. Post Orders—Supervisor.	P/C	P/C	
b. Supervisor Inspection.	C	C	
c. Post Order - Acknowledgment.	C	C	
7. Protective Vests.	C	C	

REVIEW STANDARD	REVIEW FINDING 2/07	REVIEW FINDING 4/08	PAGE NO.
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IV. USE OF FORCE			
1. Extraction.	C	C	
a. Videotape Recording.	C	C	
b. Prior authorization for use of OC.	C	C	
2. Use of OC.	C	C	
3. Decontamination.	C	C	
4. Use of Force/Reasonable Force.	C	C	
5. Reporting Force.	C	C	
6. Reviewing Force.	C	C	

COMPARATIVE STATISTICAL SUMMARY CHART

Ironwood State Prison

FEBRUARY 2007—APRIL 2008 FINDINGS

RATING	TOTAL 2/07	RATING % 2/07	TOTAL 4/08	RATING % 4/08
COMPLIANCE	53	80%	58	87%
PARTIAL COMPLIANCE	13	19%	8	12%
NONCOMPLIANCE	1	1%	1	1%
NOT RATABLE	3		3	
TOTAL	70	100%	70	100%

Formal Review of Administrative Segregation and Due Process

Ironwood State Prison

SUMMARY OF FACILITIES REVIEWED

ISP includes one main Ad Seg units and one overflow unit in this Level I and III Facility. At the time of this review, the Facility was housing 187 Ad Seg inmates.

For the purposes of the review, the OAC team toured the Ad Seg units, reviewed unit records, and interviewed unit staff to determine the degree of compliance with established departmental policy, procedures, guidelines, and relevant court-established standards.

I

CONDITIONS OF SEGREGATED HOUSING

1. **Living Conditions.** In keeping with the special purpose of a segregated housing unit, and with the degree of security, control, and supervision required to serve that purpose, the physical facilities of special purpose segregated housing will approximate those of the general population.
(Authority cited: PC, Sections 2084, 5054, and 5058. Reference: CCR, Title 15, Sections 3343(a) and 3345; and DOM, Section 52080.33.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the physical facilities of ISP's Ad Seg units approximate those of the general population.

- a. Housing units and all facilities therein will be properly maintained and regularly inspected to insure human decency and sanitation.
(Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in ISP's Ad Seg units are provided a clean, properly maintained cell that approximates those of general population inmates. Telephonic repair requests are placed to Plant Operations when repairs are needed. General repairs are completed in a timely manner. Emergency work requests and health and safety issues are completed immediately.

- b. Control of vermin and pests will be maintained by a regular inspection by the institutional vector control.
(Authority cited: Toussaint vs. McCarthy. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that ISP's Ad Seg units control vermin and pests by conducting regular inspections of the unit. Regular inspections and pesticide applications provide for the control of vermin and pests. In the event of an infestation, the Ad Seg units Sergeants notify Plant Operations and the situation is responded to immediately.

2. **Restrictions.** Whenever an inmate in Ad Seg is deprived of any usually authorized item or activity and the action and reason for that action is not

otherwise documented and available for review by administrative and other concerned staff, a report of the action will be made and forwarded to the unit administrator as soon as possible.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(b); and DOM, Section 52080.33.1.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit staff utilize an Informational Chrono (CDC 128-B) to notify appropriate administrative staff as required.

3. **Clothing.** No inmate in Ad Seg will be required to wear clothing that significantly differs from that worn by other inmates in the unit, except that temporary adjustments may be made in an inmates' clothing as is necessary for security reasons or to protect the inmate from self-inflicted harm. No inmate will be clothed in any manner intended to degrade the inmate.
(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(c); and DOM, Section 52080.33.2.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed no instances wherein inmates housed in the Ad Seg units were required to wear clothing that significantly differed from that worn by other inmates in the unit; nor were inmates clothed in a manner intended to degrade or humiliate.

4. **Meals.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be fed the same meal and ration as is provided for inmates of the

general population, except that a sandwich meal may be served for lunch. Deprivation of food will not be used as punishment.

(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(d); and DOM, Section 52080.33.3.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, reviewed unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in the Ad Seg units are receiving the same meals and rations as provided for the general population inmates. No examples of food deprivation were found in the unit. Food items are prepared in the institutional kitchen and transported to the unit in individual meal trays, which are served to the inmate population by unit staff. Food temperature logs and meal sample reports are being utilized by kitchen and unit staff.

5. **Mail.** Inmates assigned to Ad Seg, including special purpose segregated housing, will not be restricted in their sending and receiving of personal mail, except that incoming packages may be limited in number, and in content, to that property permitted in the segregated unit to which an inmate is assigned.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Sections 3138 and 3343(e); and DOM, Section 52080.33.4.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in the Ad Seg units are not restricted from either sending or receiving personal mail, except those restrictions as defined in the CCR.

6. **Visits.** Inmates assigned to segregated housing, except for inmates assigned to security housing unit (SHU), in accordance with Section 3341.5, shall be permitted to visit under the same conditions as are permitted inmates of the general population. Inmates assigned to SHUs shall be prohibited from physical contact with visitors.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(f); and DOM, Section 52080.33.5.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that all Ad Seg inmates are restricted to non-contact visits. The review team found ISP's Ad Seg visiting process to be in accordance with current departmental and institutional policy and procedures.

7. **Personal Cleanliness.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be provided the means to keep themselves clean and well groomed.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(g); and DOM, Section 52080.33.6.)

- a. Showering and shaving will be permitted at least three times a week.

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that Ad Seg inmates are provided the opportunity to shower three times per week as required. Razors for shaving are provided during shower periods.

- b. Haircuts will be provided as needed.

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that haircutting equipment is provided, upon request, for use in the inmate's cell.

- c. Clothing, bed linen, and other laundry items will be issued and exchanged no less often than is provided for general population inmates.

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that clothing, bed linen, and other laundry items are routinely issued upon reception in the Ad Seg units. These laundry items are exchanged on the same basis as the general population.

- 8. **Exercise.** Inmates assigned to special purpose segregation housing will be permitted a minimum of one hour per day, five days a week, of exercise outside their rooms or cells unless security and safety considerations preclude such activity. When special purpose segregated housing units are equipped with their own recreation yard, the yard periods may substitute for other out of cell exercise periods, providing the opportunity for use of the yard is available at least three days per week for a total of not less than ten hours a week.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(h).)

Findings

PARTIAL COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that ISP's Ad Seg units provide controlled compatible, reintegrated mixed and walk-alone yard group designations. The controlled compatible and reintegrated mixed yard group designations in Ad Seg are being offered 3 exercise periods per week, 3.5 hours per period, for a total of 10.5 hours of outdoor exercise. However, inmates assigned to the walk-alone yard group designation are not receiving the required 10 hours of outdoor exercise per week.

9. **Reading Material.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be permitted to obtain and possess the same publications, books, magazines, and newspapers, as are inmates of the general population, except that the quantity may be limited for safety and security reasons. Library services will be provided and will represent a cross-section of material available to the general population.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(i).)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that Ad Seg inmates are provided library books on a weekly basis. The books are requested from the unit staff who distribute the reading material on Second Watch.

10. **Rule Changes.** The Notice of Change to the CCR shall be posted and made available to all inmates and staff. Notices shall be posted in inmate housing unit, corridors, and other areas easily accessible to inmates, and provided to the inmate lock-up unit. The Classification and Parole Representative shall ensure

that the inmate population has knowledge of the Board of Prison Terms/Narcotic Addiction Evaluation Authority Rules and of amendments.

(Authority cited: PC, Sections 2080 and 5058(a). Reference: DOM, Sections 12010.5.8 and 12010.8.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that proposed changes, or changes to the Director's Rules, DOM, ABs, and memorandums that affect the inmate population are distributed to Ad Seg unit inmates.

11. **Telephones.** Institutions will establish procedures for the making of outside telephone calls by inmates in Ad Seg. Such procedures will approximate those for the work/training incentive group to which the inmate is assigned, except that individual calls must be approved by the supervisor in charge or the administrator of the unit before a call is made.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(j).)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that ISP provides Ad Seg inmates telephone usage pursuant to CCR, Title 15, Section 3343 (j). This includes emergency usage only.

12. **Institution Programs and Services.** Inmates assigned to segregated housing unit will be permitted to participate and have access to such programs and services as can be reasonably provided within the unit without endangering the

security or the safety of persons. Such programs and services will include, but are not limited to: education, commissary, library services, social services, counseling, religious guidance and recreation.

(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(k).)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that ISP provides programs to include commissary, library services, recreation, and spiritual counseling. In addition, religious publications are provided upon request.

13. **Visitation and Inspection.** Inmates assigned to Ad Seg, including special purpose segregated units, will be seen daily by the custodial supervisor in charge of the unit and by a physician, registered nurse, or medical technical assistant and, by request, members of the program staff. A timely response should be given to such requests wherever reasonably possible.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(l).)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that a custody supervisor is assigned to the Ad Seg units on both Second and Third Watches. In addition, management staff are available for interviews prior to ICC hearings and CDC 114-D segregation placement administrative reviews. The Facility Sergeant tours the units during First Watch to ensure any emergency is properly addressed. Medical staff are assigned to the units on Second and Third Watches passing out medication, collecting sick call slips, and screening

for medical and mental health needs. During First Watch, medical and psychiatric staff are available to respond to emergencies from Central Health upon request by unit staff.

- a. The custodial officer in charge of a disciplinary detention unit, segregation unit, or SHU, where inmates are segregated for disciplinary or administrative purposes, will ensure that inmates needing medical attention receive it promptly.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit custody staff notifies medical staff in the event of any medical situation or emergency. The general medical treatment line is conducted on Tuesdays. In addition, as stated above, medical staff are assigned to the units.

14. **Management Cells.** Inmates assigned to segregated housing, who persist in disruptive, destructive, and dangerous behavior and will not heed or respond to orders and warnings to desist, are subject to placement in a management cell, as provided in CCR, Title 15, Section 3332(f).
(Authority cited: PC, Sections 2601(d), 5054, and 5058. Reference: CCR, Title 15, Section 3343(m).)

- a. An inmate who persists in unduly disruptive, restrictive, or dangerous behavior and who will not heed or respond to orders and warnings to desist from such activity, may be placed in a management cell on an order of the unit's administrator or, in his or her absence, an order of the watch commander.

Findings

NOT RATABLE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The audit revealed that ISP does not utilize management cells.

- b. In addition to any necessary incident or disciplinary reports, the matter will be reported to the Warden, Superintendent, Chief Disciplinary Officer, or AOD, one of whom will review management cell resident status daily.

Findings

NOT RATABLE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The audit revealed that ISP does not utilize management cells.

- c. An inmate, who requires management cell placement for longer than 24 hours, will be considered for transfer to a psychiatric management unit or other housing appropriate to the inmate's disturbed state.
(Reference: CCR, Title 15, Section 3332(f); and DOM, Section 52080.22.4.)

Findings

NOT RATABLE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The audit revealed that ISP does not utilize management cells.

15. **Access to the Courts.** Inmates confined in Ad Seg for any reason will not be limited in their access to the courts. If an inmate's housing restricts him or her from going to the inmate law library, arrangements will be made to deliver requested and available library material to the inmate's quarters.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3164(a) and (d); DOM, Section 53060.10; and Toussaint v. Gomez.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed ISP's Ad Seg units provides both paging and direct access to a law library. Inmates submit written requests for law library services to the unit Officer, who screens the requests and schedules the inmates for access. Preferred legal users and inmates with court deadlines receive priority access.

16. **Ad Seg Log.** A CDC 114 will be maintained in each Ad Seg units, including special purpose segregated units. One CDC 114 may serve two or more special purpose units which are administered and supervised by the same staff members.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(a); and DOM, Section 52080.22.5.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114 is maintained within the Ad Seg units. All entries are appropriately recorded in accordance with departmental policy and procedures.

17. **Daily Inmate Segregation Record.** A separate record will be maintained for each inmate assigned to Ad Seg, including special purpose segregated units. This record will be compiled on the CDC 114-A and the CDC 114-A1.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(b); DOM, Section 52080.22.5; and IB 98/27.)
- a. All significant information relating to the inmate during the course of segregation, from reception to release, will be entered on the CDC 114-A in chronological order.

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114-A is maintained for each inmate assigned to the Ad Seg units. The CDC 114-As were found to contain significant information, in chronological order, relating to the inmate during the course of segregation.

- b. The CDC 114-A1 documents the inmate's current yard group designation.

Findings

PARTIAL COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review team reviewed a random sample of 20 CDC 114-A1s. Of the 20 CDC 114-A1s reviewed, 1 was not ratable as the inmate had not yet been to ICC. Of the 19 ratable CDC 114-A1s, 13 (68 percent) documented the inmate's current yard group designation.

- c. The CDC 114-A1 documents the inmate's special information.

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

Each (100 percent) of the 20 CDC 114-A1s reviewed documented the inmate's special information.

- d. The CDC 114-A1 will be maintained in the segregation log and be updated as new information is obtained. The Segregation Officer shall begin a new CDC 114-A1 at least every 90 days or at anytime this form becomes difficult to read.

Findings

NONCOMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that in a random sample of 20 CDC 114-A1s, 13 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require a 90-day update. Of the 7 ratable CDC 114-A1s reviewed, 2 (29 percent) were updated as appropriate.

18. **Safety.** Each Warden and Superintendent must have in effect, at all times, a plan approved by the Director for meeting emergencies delineated and required by the California Emergency Services Act of 1970.
(Authority cited: PC, Sections 5454 and 5458. Reference: CCR, Title 15, Sections 3302(b)(4) and 3303(a)(4); and DOM, Sections 52090.1, 2, 5, 6.1, 7, and 52090.19.)

- a. Institution heads shall maintain procedures for fire prevention and suppression. Fire protection practices and departmental policy mandate that all employees be instructed and trained concerning their duties and responsibilities should it become necessary to conduct an emergency evacuation for any fire or life threatening condition.
(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 2090.19.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that ISP's Ad Seg units maintains OP No. 044, Ad Seg units, regarding fire protection and training.

- b. Staff and inmates shall be familiar with fire evacuation routes, exits, and procedures. An evacuation drill shall be conducted quarterly on each watch. Where such drills would jeopardize personal safety or facility security, staff shall conduct a walk-through of the procedure. Such walk through drills shall be monitored by the area supervisor to ascertain that actual evacuation could be accomplished as required.
(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 52090.19.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that staff are trained with emergency evacuation plan procedures and evacuation routes are conspicuously posted within the units. Of the 12 required simulated emergency fire drills, documentation was provided to verify that 11 (92 percent) were completed.

- c. At the conclusion of fire drills, the area supervisor shall complete a Fire Drill Report (DS 5003) indicating the necessary information and forward a copy to the Fire Chief.

(Reference: CCR, Title 15, Section 3303(a)(4); and DOM, Section 52090.19.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that when quarterly simulated emergency fire drills are conducted, DS 5003s are being completed and forwarded to the Fire Chief as required.

II

DUE PROCESS

Procedural safeguards essential for effective transfers of prisoners from the general prison population to a maximum security unit in order to segregate such prisoners for administrative reasons or purposes.

1. **Authority.** Authority to order an inmate to be placed in Ad Seg, before such action is considered and ordered by a classification hearing, may not be delegated below the staff level of Correctional Lieutenant, except when a lower level staff member is the highest ranking official on duty.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336; and DOM, Section 52080.25.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation on the CDC 114-D to confirm the level of the official ordering segregation placement was at the Correctional Lieutenant level or higher.

2. **Written Notice.** The reason for ordering an inmate's placement in Ad Seg will be clearly documented on a CDC 114-D by the official ordering the action at the time the action is taken.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336(a); DOM, Section 52080.25; and IB 98/27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Each (100 percent) of 30 records reviewed clearly documented the reasons for Ad Seg placement.

3. **Receipt of CDC 114-D.** A copy of the CDC 114-D with the "order" portion of the form completed, will, if practical, be given to the inmate prior to placement in Ad Seg, but not later than 48 hours after such placement.
(Authority: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3336(d) and 3339(b)(1); and DOM, Section 52080.25.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that indicated the inmates were given a copy of the CDC 114-D within 48 hours of placement.

4. **Confidential Material.** Documentation given the inmate concerning information from a confidential source shall include an evaluation of the source's reliability, a brief statement of the reason for the conclusion reached, and a statement of the reason why the information or source is not disclosed.
(Authority: PC, Sections 2081.5, 2600, 2601, 5054, and 5058. Reference: CCR, Title 15, Section 3321(b)(2); and DOM, Sections 52080.27.4 and 61020.9.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of 30 records reviewed, 23 were not ratable as the reasons for Ad Seg placement was not based upon confidential information. Each (100 percent) of the 7 ratable records included an appropriate Confidential Information Disclosure (CDC 1030) in the central file issued within the required time frame.

5. **Review.** On the first work day following an inmate's placement in Ad Seg, designated staff at not less than the level of Correctional Captain will review the order portion of the CDC 114-D. If retention in Ad Seg is approved at this review, the following determinations will be made at this level.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3337.)

Findings

PARTIAL COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 20 (67 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 10 remaining records, 5 documented a late review by a Captain (1 to 3 days late) and 5 records documented a late countersignature by an Associate Warden when the review was conducted by an acting Captain (1 to 3 days late).

- a. Determine the appropriate assignment of staff assistance.
(Reference: CCR, Title 15, Section 3337(a).)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 28 (93 percent) contained documentation of a determination for the assignment of a SA/IE. The 2 remaining records left the IE section incomplete.

- b. Determine the inmate's desire to call witnesses or submit other documentary evidence. If the inmate requests the presence of witnesses or submission of documentary evidence at the classification hearing on the reason or need for retention in segregated housing, an IE will be assigned to the case. A request to call witnesses must be submitted in writing by the inmate.
(Reference: CCR, Title 15, Section 3337(b).)

Findings

PARTIAL COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 18 (60 percent) contained documentation regarding the need for witnesses. The 12 remaining records left this section blank.

- c. Determine if the inmate has waived the 72-hour time limit in which a classification hearing cannot be held, as indicated on the CDC 114-D or the inmate desires additional time to prepare for a classification hearing.
(Reference: CCR, Title 15, Section 3337(c).)

Findings

PARTIAL COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 17 (57 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. The 13 remaining records left this section blank.

- d. Determine the most appropriate date and time for a classification hearing based upon the determination arrived at under Section 3337(a), (b), and (c), and the time limitations prescribed in CCR, Title 15, Section 3338.
(Reference: CCR, Title 15, Section 3337(d).)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that the hearing time frames were appropriate based on the inmate's request. The 1 remaining record did not document that an initial hearing had been held on a reissued CDC 114-D.

- e. Decision to retain in Ad Seg or release to unit/facility.

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that an appropriate decision was made to retain or release the inmate based on the administrative review.

- 6. **Classification Hearing.** An inmate's placement in temporary segregation shall be reviewed by the ICC within 10 days of receipt in the unit.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3335(c), 3338(a), (b), (c), (d), (g), (h), (i), 3375, and 3339 (b) (2); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

PARTIAL COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 25 (83 percent) contained documentation of an ICC review within 10 days of an inmate's placement in Ad Seg. Of the 5 remaining records, 4 documented the hearing was not held within the required time frame (2 to 10 days late) and 1 record did not document that an initial hearing had been held on a reissued CDC 114-D.

- a. The determinations arrived at in the classification hearing will be documented on the CDC 128-G. Such documentation will include an explanation of the reason and the information and evidence relied upon for the action taken. The inmate will also be given copies of all completed

forms and of all other documents relied upon in the hearing, except those containing confidential information.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3338(i), 3375(g), and (h); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of the determinations arrived at during ICC on the CDC 128-G. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

- b. Was the hearing date recorded on the CDC 128-G?
(Reference: CCR, Title 15, Section 3375(g)(9); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained the appropriate hearing dates on the CDC 128-Gs. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

- c. Was the inmate's presence at the hearing documented on the CDC 128-G?
(Reference: CCR, Title 15, Sections 3338(c) and 3375(g)(5); and DOM, Section 52080.27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation to verify the inmate's presence or absence at the hearing on the CDC 128-G. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

- d. Were the Hearing Officers identified on the CDC 128-G?
(Reference: CCR, Title 15, Sections 3375(g)(6-8); DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) identified the Hearing Officers on the CDC 128-G. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

- e. If appropriate, were the SA and the IE identified in the CDC 128-G?
(Reference: CCR, Title 15, Section 3338(c)(i); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 28 were not ratable as the need for a SA/IE was properly documented on the CDC 114-D. Each (100 percent) of the 2 ratable records documented the need for a SA/IE on the CDC 128-G when this information was not otherwise properly documented on the CDC 114-D.

- f. If appropriate, was the witness portion addressed in the CDC 128-G?
(Reference: CCR, Title 15, Sections 3338(h) and (i); and DOM, Section 52080.27.3-4.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 18 were not ratable as the need for witnesses was properly documented on the CDC 114-D. Each (100 percent) of the 12 ratable records contained documentation regarding the need for witnesses on the CDC 128-G when the information was not otherwise properly documented on the CDC 114-D.

- g. The completed CDC 128-G contains the yard group designation arrived at during the classification hearing.
(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 98/27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 28 (93 percent) contained documentation of the inmate's yard group designation on the CDC 128-G. Of the 2 remaining records, 1 did not contain this information on the CDC 128-G and 1 record did not document an initial hearing on a reissued CDC 114-D.

- h. The completed CDC 128-G documents the inmate's current cell status (single or double celled).
(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 97/27.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of the inmate's current cell status on the CDC 128-G. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

- i. The completed CDC 128-G documents the inmate's participation during committee and their agreement or disagreement with the ICC's action.
(Reference: CCR, Title 15, Sections 3338(i) and 3375(f)(2-6); and DOM, Section 52080.27.4.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of the inmate's participation during ICC on the CDC 128-G. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

7. **Classification Review.** Instead of ICC reviewing each inmate's case every 30 days, inmates in Ad Seg for non-disciplinary reasons shall require routine review no more frequently than every 90 days or when scheduled by staff for specific action. Inmates segregated for disciplinary reasons shall be reviewed by ICC at least every 180 days or when scheduled by staff for specific action.
(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg units Classification Review.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 21 were not ratable as the inmates had not been on Ad Seg status long enough to require a follow-up review. Each (100 percent) of the 9 ratable records contained documentation of an ICC review as appropriate.

8. **CSR Review.** All inmates retained in Ad Seg at their ten-day Ad Seg hearing shall be referred to the CSR for retention authorization at that initial review.
(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg units Classification Review.)

Findings

COMPLIANCE

The OAC review team examined 30 central files of inmates housed in ISP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that indicated the case had been referred to a CSR for review as appropriate. The 1 remaining record did not document an initial hearing on a reissued CDC 114-D.

III

ADMINISTRATION

1. **Training.** All staff working in specialized units are to receive specialized training centering on that unit's operation and program.
(Authority cited: PC, Sections 830.5, 832, 5054, 5058, 13600, and 13601. Reference: DOM, Section 32010.14.5.)

Findings

COMPLIANCE

The OAC review team interviewed In-Service Training staff and examined the training records of all Ad Seg staff assigned to the units for one year or more.

The review revealed that 9 custody staff have been assigned to the Ad Seg units for one year or more. These 9 staff members are each required to have received 11 specialized training classes. Each (100 percent) of the 99 required classes have been taken.

2. **ICC.** The ICC shall consist of:
 - Warden or Regional Parole Administrator, or Deputy Warden or Assistant Regional Parole Administrator (chairperson);
 - Correctional Administrator or Parole Administrator III (alternate Chairperson);
 - Psychiatrist or Physician;
 - Facility Captain;
 - Correctional Captain;
 - CC III or Parole Agent III, or CC II or Parole Agent II (Committee Recorder);
 - Assignment Lieutenant;
 - Educational or Vocational Program Representative; and
 - Other Staff as required.**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3376(c)(2); and DOM, Section 62010.8.2.)**

Findings

COMPLIANCE

The OAC review team examined 30 central files and reviewed CDC 128-Gs.

The review revealed that the composition of ICC was in compliance with this standard.

3. **Record of Disciplinary.** All institutions will maintain a Register of Institution Violations. A Register of Institution Violations is a compilation of one completed copy of each rule violation report issued at a facility, maintained in chronological order.
(Authority cited: PC, Sections 2081, 5054, and 5058. Reference: CCR, Title 15, Sections 3326(a)(1-2); and DOM, Section 52080.15.1.)

Findings

COMPLIANCE

The OAC review team interviewed appropriate staff and examined the Disciplinary Log and Register of Institutional Violations.

The review revealed that the Institution maintains one Register of Institutional Violations that meets the basic requirements of DOM. A tracking system is used to follow each disciplinary log number and adjudicated Rules Violation Report.

4. **Post Order - Firearms.** Detailed instructions regarding the use of firearms shall be contained in the post orders of armed posts and shall be issued to staff that may regularly be required to use firearms in the course of their duties.
(Authority cited: PC, Sections 830, 832.5, 5054, and 5058. Reference: DOM, Section 55050.4.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that there are 7 identified gun posts (6 Control Booths and 1 yard guns) that require use of force policies be addressed as part of the post orders. Each (100 percent) of the 4 armed posts directed the staff member to read, understand, and become familiar with the departmental Use of Force Policy, CCR, Title 15, Section 3268.

5. **Post Order - Job Site.** A copy of the post order shall be provided for every post and a copy shall be physically located at each job site.
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a current copy of the post order is provided at the job site for each (100 percent) of the 33 Ad Seg posts.

6. **Post Orders—Signatures.** Employees under post orders are required to sign and date the Post Order Acknowledgment Sheet (CDC 1860), verifying their understanding of the duties and responsibilities of the post. This shall be completed when the employee is assigned to the post, when the post order has been revised, or upon returning from an extended absence.

Findings

PARTIAL COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed there are 39 identified staff who are assigned to 33 Ad Seg unit posts. Of the 47 required signatures, 25 (53 percent) were present acknowledging the understanding of the post orders.

- a. **Post Order—Supervisor.** Supervisors, by authority of the Correctional Captain or area Manager, shall ensure that employees read and understand their post orders upon assuming their post.
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.1.)

Findings

PARTIAL COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

- b. At a minimum of once each month, supervisors shall inspect the post orders and sign the CDC 1860. Any torn or missing pages noted shall be replaced as soon as practical.

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that the custodial supervisors assigned to the Ad Seg units inspect the CDC 1860 on a monthly basis.

- c. A CDC 1860 shall be attached to each post order and shall be utilized to verify that the assigned staff member has read and understood the post

orders for their post. CDC 1860s shall be kept for a period of one year from the date of last entry unless deemed evidentiary (then retained until no longer needed).

(Authority cited: PC, Sections 5054 and 5058. Reference DOM, Section 51040.6.2.)

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that ISP utilizes a CDC 1860 to allow the staff member to verify, by signature, that they have read and understand the order for the post and this is then countersigned by the supervisor. Each (100 percent) of the 33 post orders reviewed contained the current acknowledgment sheet.

6. **Protective Vests.** All CDCR employees, regardless of personnel classification, entering a Security Housing Unit, Special Management Program, ASU, Temporary Detention Unit, Condemned Housing Unit, Psychiatric Services Unit, or Special Behavioral Treatment Program, shall wear a Stab Resistant Vest when the employee is:
- In direct contact with inmates/wards/patients within the aforementioned units (unrestrained or restrained).
 - Escorting inmates/wards/patients housed within the aforementioned units anywhere on institution grounds.
 - On the aforementioned unit tiers.
- (Authority cited: DOM, Section 33020.16.2)**

Findings

COMPLIANCE

The OAC review team toured ISP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that all staff wear a protective vest while in the Ad Seg units.

IV

USE OF FORCE

1. **Extraction.** Before making the final decision to proceed with any extraction, custody/health care staff must consider the gravity of the situation, coupled with the inmate's demeanor, e.g., verbal aggression as opposed to physical aggression, prior history of violence, physical threat to the safety of others, security of the Institution, etc., which may reasonably occur if the inmate is not moved.
(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268 (b); and AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU within the last year.

Of the eight incident reports reviewed, seven were not ratable as they did not necessitate an extraction. The one (100 percent) ratable incident contained documentation that consideration was given to the gravity of the situation, coupled with the inmate's demeanor, prior history of violence, physical threat to the safety of others, security of the Institution, etc., which may reasonably occur if the inmate is not moved.

- a. Preplanned tactical extraction situations will be videotape recorded.
(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU within the last year.

Of the eight incident reports reviewed, seven were not ratable as they were not handled as calculated use of force. The one (100 percent) ratable incident report documented that the incident was properly videotape recorded.

- b. In calculated use of force situations where inmates are housed, a supervisor shall administer the OC product against the inmate and any extraction will be videotape recorded. Prior authorization for the use of an OC product shall be obtained during business hours at the level of Correctional/Facility Captain, or higher, and during non-business hours the AOD.

(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages of use of force on inmates housed in ISP's ASU within the last year.

Of the eight incident reports reviewed, seven were not ratable as they were not handled as calculated use of force. The one (100 percent) ratable incident report documented that the prior authorization for the use of OC was properly obtained or denied.

- 2. **Use of OC.** In institutions, the use of OC is designed to control, subdue, contain, or escort a combative, assaultive, violent, or physically resistive inmate(s). The use of this chemical agent shall not be for punishment and must be reasonable and necessary.

(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU during the past year.

Of the eight incident reports reviewed, one was not ratable as it did not necessitate the use of OC. Each (100 percent) of the seven ratable records documented that the use of OC was appropriate.

3. **Decontamination.** Any exposed individual shall be decontaminated in accordance with departmental policy. Those refusing decontamination shall be monitored by health care employees at least every 15 minutes for a period of not less than 45 minutes with documentation of their observations on a Medical Report of Injury or Unusual Occurrence.
(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 96/4R and AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU during the past year.

Of the eight incident reports reviewed, one was not ratable as it did not necessitate the use of OC. Each (100 percent) of the seven ratable records documented the decontamination of the inmate or refusal by the inmate of decontamination, as appropriate.

4. **Use of Force/Reasonable Force.** The force that an objective, trained, and competent correctional employee, faced with similar facts and circumstances, would consider necessary and reasonable to subdue an attacker, overcome resistance, effect custody, or gain compliance with a lawful order.
(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268(a)(1); and AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU during the past year.

Each (100 percent) of the eight incident reports reviewed documented that the force used was necessary and reasonable to subdue an attacker, overcome resistance, effect custody, or gain compliance with a lawful order.

5. **Reporting Force.** An employee who uses or observes non-deadly force greater than verbal persuasion to overcome resistance or gain compliance with an order shall document that fact. The document shall identify any witnesses to the incident and describe the circumstances giving rise to the use of force, and the nature and extent of the force used. The employee shall provide the document to his or her immediate supervisor.
(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268.1(a)(1); and AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU during the past year.

Each (100 percent) of the eight incident reports reviewed indicated that a report, including the identification of witnesses, was written by the employee who used or observed non-deadly force greater than verbal persuasion. These reports were then given to the employee's immediate supervisor as required.

6. **Reviewing Force.** The employee's immediate supervisor shall review the document to ensure that it is adequately prepared and to reach a judgment concerning the appropriateness of the force used. The supervisor shall document his or her conclusions and forward them along with the employee's document, through the designated chain of command, to the institutional head for approval or follow-up action.
(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268.1(a)(2); and AB 99/03.)

Findings

COMPLIANCE

The OAC review team examined eight closed incident report packages that documented use of force on inmates housed in ISP's ASU during the past year.

Each (100 percent) of the eight incident reports reviewed indicated the involved employee's immediate supervisor reviewed the report, ensured that it was adequately prepared, and reached a judgment concerning the appropriateness of the force used. The reports were then forwarded through the designated chain of command, to the institutional head and Executive Review Committee for analysis, approval, or follow-up action.

Review of Administrative Segregation and Due Process

Ironwood State Prison

GLOSSARY

AB	Administrative Bulletin
Ad Seg	Administrative Segregation
AOD	Administrative Officer of the Day
CC	Correctional Counselor
CCR	California Code of Regulations
CDCR	California Department of Corrections and Rehabilitation
CDC 114	Isolation Log Book
CDC 114-A	Inmate Daily Segregation Record
CDC 114-A1	Inmate Segregation Profile
CDC 114-D	Administrative Segregation Unit Placement Notice
CDC 128-B	Informational Chrono
CDC 128-G	Classification Chrono
CDC 1030	Confidential Information Disclosure
CDC 1860	Post Order Acknowledgment Sheet
CSR	Classification Staff Representative
DOM	Department Operations Manual
DS 5003	Fire Drill Report
IB	Informational Bulletin
ICC	Institution Classification Committee
IE	Investigative Employee
ISP	Ironwood State Prison
OAC	Office of Audits and Compliance
OC	Oleoresin Capsicum
OP	Operational Procedure
PC	California Penal Code
SA	Staff Assistant
SHU	Security Housing Unit

CALIFORNIA DEPARTMENT OF CORRECTIONS AND
REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS AND RECOMMENDATIONS

BUSINESS SERVICES

IRONWOOD STATE PRISON

APRIL 1 – APRIL 11, 2008

PRELIMINARY

CONDUCTED BY
THE AUDITS BRANCH



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**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

IRONWOOD STATE PRISON

INTRODUCTION

The California Department of Corrections and Rehabilitation's (CDCR), Office of Audits and Compliance (OAC), Audits Branch conducted an audit of Business Services at Ironwood State Prison (ISP). The purpose of the audit was to analyze and evaluate the level of compliance with State and departmental policies, procedures, rules, regulations, operational objectives, and guidelines. The following areas were audited:

- Personnel Transactions;
- Delegating Testing;
- Payroll/Accounting;
- Position Control;
- Procurement (i.e., Service and Expense Orders/Direct Pay);
- Materials Management (i.e., Warehousing and Inventory Control);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

The fieldwork was performed during the period of April 1 through April 11, 2008. The exit conference was held on April 11, 2008.

René Francis, Certified Government Financial Manager, supervised the audit. Management Auditors Annette Sierra, Annecia Coleman, Michael Robinson, Deborah Brannon and Naomi Banks conducted the audit. In addition, Shirley Cowley, Hazardous Materials Specialist, California Rehabilitation Center provided subject matter expertise. Patricia Weatherspoon, Senior Management Auditor provided second line supervision and review. Richard C. Krupp, Assistant Secretary of the OAC, provided executive management oversight.

The audit consisted of an entrance conference, review of the prior reports, test of transactions, interviews, observations, periodic management briefings, an exit conference, and issuance of the preliminary audit report.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

IRONWOOD STATE PRISON

AUDIT SCOPE

The scope of the audit encompasses the examination and evaluation of the adequacy and effectiveness of ISP's system of management control and compliance to applicable policies, procedures, rules, and regulations. The audit period may include prior fiscal years if deemed necessary. The control objectives include, but are not limited to the following:

- State assets are safeguarded from unauthorized use or disposition;
- Transactions are executed in accordance to management's authorizations;
- Transactions are executed in accordance with applicable rules and regulations;
- Transactions are recorded correctly to permit the preparation of financial and management reports; and
- Programs are working efficiently and effectively.

In order to determine the adequacy of the control systems and level of compliance with State, federal, and departmental fiscal procedures, the audit team performed the following audit procedures:

- Examined evidence on a test basis supporting management's assertions;
- Performed detailed analyses of documentation and transactions;
- Interviewed Facility staff;
- Made inspections and observations;
- Performed group discussions of the overall impact of deficiencies; and
- Discussed deficiencies with supervisors and management throughout the audit process.

SYMPTOMS OF CONTROL DEFICIENCIES

Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These symptoms may apply to the organization as a whole or to individual units or activities. Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent;
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent;
- Financial and operational reporting is not timely and is not used as an effective management tool;
- Line supervisors ignore or do not adequately monitor control compliance;
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis;
- Internal control weaknesses detected are not acted upon in a timely fashion; and
- Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources.

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AUDITS BRANCH**

IRONWOOD STATE PRISON

CORRECTIVE ACTION PLAN

ISP's corrective action plan (CAP) is due within 30 days of receipt of the draft report. See Attachment A for a sample of the format.

The CAP is designed to document the institution's plan to fully resolve the audit findings. It includes a brief description of the audit finding, the classification of the personnel directly responsible for resolving the finding(s), their telephone number and/or extension, a brief description of the proposed action and the anticipated date of completion.

Please e-mail your completed CAP to Alberto.Caton@cdcr.ca.gov and Rose.Mitjans@cdcr.ca.gov. Send the original to Alberto Caton, (AB), PO Box 942883, Sacramento, CA 95811-7243.

If you need additional time to prepare your CAP, please contact René Francis, Staff Management Auditor, at (916) 358-2070 or Patricia Weatherspoon, Senior Management Auditor at (916) 358-1801.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

IRONWOOD STATE PRISON

EXECUTIVE SUMMARY

The Audits Branch conducted an audit of the Business Services Operations at ISP from April 1 through April 11, 2008. The purpose of the audit was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures.

The exit conference was held on April 11, 2008. The AB requested that ISP provide a CAP within 30 days of receipt of the preliminary audit report.

Areas audited:

- Personnel Transactions;
- Delegating Testing;
- Payroll/Accounting;
- Position Control;
- Procurement (i.e., Service and Expense Orders/Direct Pay);
- Materials Management (i.e., Warehousing and Inventory Control);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

Twenty-five findings are identified in the preliminary audit report, categorized under the following topics:

Category	Number of Findings	Page Number
Administrative Concerns	3	
Policies and Procedures	1	
Health and Safety	8	
Internal Controls	4	
Late Detection and Additional Workload	9	
Total	25	

This executive summary provides the category, a brief description of the finding, prior finding if applicable, policy violated and the impact on the institution.

It should be noted that employee turnover in Business Services over the past 12 months is as follows: Accounting 67 percent, Plant Operations 42 percent, Personnel 47 percent, and Food Services 33 percent. This issue may impact the institutions ability to meet workload requirements and comply with all applicable policies and procedures.

I. ADMINISTRATIVE CONCERNS

A. Personnel

Based on the March 24th, 2008 Vacancy Report, there are 58 Correctional Officers paid out of the 918 blanket. However, the Institution only has 28 vacant positions of which 10 are fractional. **State Administrative Manual (SAM), Section 8531.**

Impact: This practice over expends the budget authority.

Probation Reports and Individual Development Plans (IDP) are not prepared by supervisors for employees under their supervision. As of April 10, 2008, there are 515 reports outstanding that were due by January 31, 2008. **Personnel Transactions Manual (PTM), Section 900.1.**

Impact: Employees may not be aware of job performance and work expectations.

Organizational Charts for Business Services are not always accurate. For example, the position numbers displayed as vacant are often filled and vice versa. **CDCR and Department of Personnel Administration (DPA) Delegation Program Agreement.**

Impact: This makes it difficult to reconcile the position number that employees are paid out of.

II. POLICIES AND PROCEDURES

Department Operations Manual (DOM) Supplements and Operational Procedures (OP) are not always reviewed and updated on an annual basis. Of the 14 DOM Supplements reviewed nine are outdated and of the 42 OP's reviewed 13 are outdated. **SAM, Section 20050**

Impact: Dom Supplements and Ops may not provide current information/policy. As a result; staff may not be aware of current policies and procedures relative to performing their jobs

III. HEALTH AND SAFETY

A. Environmental Health and Safety

The ISP Business Plan is not current, complete, neither approved nor signed by the Warden since 2001 or 2004. There are also multiple versions. For example, the name and the phone number of the emergency contacts (primary and secondary) has not been updated. The Spill Prevention, Control and Counter Measure Plan (SPCC) have never been formalized and adopted for the above ground and underground storage tanks (UST). There are no written monitoring procedures. The site map is not included. **CCR, Title 19, Section 2729.2**

Impact: This practice makes it difficult to determine accountability over the Business Plan and may result in an increased threat to life, health, and safety. In addition, this issue may be cause for revocation of the permit.

We noted deficiencies regarding the Hazardous Communication Program at 9 locations. (Plumbing Shop A- Yard, Vector Control A-Yard, Maintenance Mechanics Shop A-Yard, Vocational Bulk Janitorial and Masonry, Vocational Refrigeration and Auto, Housing Units A-1 and D-1). A common deficiency found at 8 of the 9 locations is inadequate indexing and updating of Material Safety Data Sheets (MSDS). **CCR, Title 8.**

Impact: This results in an increased threat to life, health and safety.

The AB noted three deficiencies at the Hazardous Waste storage site: **CCR, Title 8.**

- Accumulation dates on the Fixer/Developer container exceeded the 90 day storage limits.
- A pallet of waste paints was left outside the storage area without Waste labels or accumulation start dates.
- Waste paint containers were placed in drums without lids.

Impact: This issue could result in fines and penalties and your hazardous management permit could be revoked.

It does not appear that a complete and comprehensive IIPP has been established. The following eight elements should be included in the IIPP, Responsibility, Compliance, Communication, Hazard Assessment, Accident/Exposure Investigation, Hazard Correction, Training and Instruction, and Recordkeeping. **CCR, Title 8.**

Impact: This condition could result in staff not conducting their jobs in a healthy and safe environment.

The attendance at the safety committee meetings is inconsistent. For example, some meetings have four attendees and some have fifteen. Additionally, it is difficult to determine who is a member of the safety committee. **DOM, Article 2, Section 31020.**

Impact: Day to day safety issues are not raised and resolved. Also, this issue gives the appearance that the ISP safety committee is given a low priority.

ISP's written site specific Exposure Control Plan (ECP) has not been updated since 2003. The updates should include but not limited to the current post exposure providers, locations of Personal Protective Equipment (PPE) and Infection control practice and/or policy and procedures for handling soiled linen. **ISP IIPP and Medical Waste Management Act (MWMA), Section 117600 – 118360.**

Impact: This may result in staff coming in contact with hazardous substances that may transmit diseases.

The system for identifying and communicating work place hazards is not in place in accordance to the ISP-IIPP. Staff is not supplied with access to current hazard information pertinent to their work assignments. We noted that the Codes of Safe practices and Hazard Evaluations are incomplete. They are missing the date prepared and the name and title of the preparer. **ISP IIPP.**

Impact: Difficult to determine who prepared the codes, and the date of last review

A sharps container for the disposal of bio-hazardous waste is not easily accessible in the A facility clinic. **CCR, Title 22.**

Impact: This issue increases the risk of employees coming in contact with hazardous substances that may transmit diseases.

III. INTERNAL CONTROL

A. Non-Drug Medical (Prior Finding)

The non-drug medical warehouse has the following deficiencies:

- Inventory reconciliations are not performed.
- Stock records are not maintained.
- Access is not adequately controlled.
- Separation of Duties is inadequate.

SAM, Section 20050 and DOM, Section 22030.10 - .11.

Impact: These issues result in the late detection of errors, irregularities, theft and/or misappropriation.

B. Inmate Trust Accounting

The Cash Payment Fund Reconciliation sheets tested for a six-month period were not reviewed and signed by the supervisor in 29 instances. **SAM, Section 7908.**

Impact: This condition may result in late detection of errors and irregularities.

Separation of Duties are inadequate when the person who prepares Bank Reconciliations has access to blank check stock. Exacerbating this practice is that at times she prepares the log of issued and written checks, voids checks, approves deposits, prepares deposits and goes to the bank. **SAM, 8080.1.**

Impact: This condition may result in late detection of errors, irregularities, theft and misappropriation.

C. Support Warehouse

Inventory adjustments are posted prior to approval of the business manager. **SAM, Section 10860.**

Impact: This condition may result in late detection of errors, irregularities, theft and/or misappropriation.

IV. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel

The attendance records do not reflect accurate time used. Also, the Personnel Post Assignment System (PPAS) does not reflect the changes made to leave credits used when an employee opts to use leave credit verses dock. **Administrative Bulletin 04-01.**

Impact: This practice results in late detection of inappropriate use of leave and inaccurate attendance records.

Twenty-one Leave Buy Back payments were issued out of the 912 blanket verses the 669 blanket serial number. **See email from the Office of Personnel services dated May 17, 2007**

Impact: Payments are charged to the incorrect blanket. Therefore, expenditures may be over or understated on year end reports.

The Periodic Position Control Report, dated March 1, 2008, notes 33 positions, of which 17 of are over expended. In addition, three fractional positions have been over expended. **Payroll Procedures Manual (PPM), Section C309.**

Impact: This practice results in the over expending of the budget authority.

The Prevailing Wage Sheets (PWS) from the Department of Industrial Relations (DIR) are not being used to determine that the correct hourly rate is applied based on a test of two casual laborers. **Personnel/Payroll Services Guidelines, Section A600**

Impact: Incorrect payment of wages, benefits, possible overpayments and employees may be unable to collect their unemployment benefits. .

B. Support Warehouse

Std. Form 115's are incomplete. The forms do not contain the necessary signatures of the requester, approver or receiver. **SAM, 22030.**

Impact: This can result in late detection of errors, irregularities and/or misappropriations.

C. Plant Operations

Completed work orders are not reviewed and turned in to the SAPMS coordinator in a timely manner. In addition, there is a backlog of over 2100 work orders that have been outstanding for over 90 days. **ISP Work Order Procedure, Section F.**

Impact: The supervisors may not be aware of the status of work orders and the POM report may not accurately reflect plant operations activities.

The Plant Operations Maintenance Report (POM) does not accurately reflect plant operations activities. For example, total hours are understated by 5000 hours for the period of September 2007 – March 2008. The POM is not reviewed by management. Additionally, there is 2700 hours of overtime totalling \$116,453 that is not reflected in the POM. **DOM, Section**

Impact: Inaccurate reports are provided to management for decision making.

D. Food Services (Prior Finding)

The following deficiencies were noted related to inmate timekeeping in the Main Kitchen, and Facilities B, C, and E: **CCR, Title 15, Section 3045 and ISP's IW/TIPhandbook pages 16 through 18.**

- Inmates are not signed in/out when their shift is beginning and ending
- The CDCR 1697 are incomplete. They are missing the transfer in/out dates and the DMS number.
- Exceptional time is not noted.

Impact: This condition may result in late detection of errors, increased workload, and delay in processing inmate pay.

Temperature logs are not maintained for the Central Kitchen scullery. **DOM, Section 54080.**

Impact: This may result in late detection of equipment malfunction.

FINDINGS AND RECOMMENDATIONS

I. ADMINISTRATIVE CONCERNS

Turnover (Prior Finding)

It should be noted that turnover in the areas under Business Services has been significant over the past 12 months. For example, turnover in Accounting is 67 percent, Plant Operations 42 percent, Personnel 47 percent, and Food Services 33 percent. This condition makes it difficult to meet workload requirements and comply with all policies and procedures related to operations.

A. Personnel

1. Hiring Over Budget Authority

Based on the March 24th, 2008 Vacancy Report, there are 58 Correctional Officers paid out of the 918 blanket. However, the Institution only has 28 vacant positions of which 10 are fractional.

This practice results in over expending the budget authority.

SAM, Section 8531, Established Positions, states, "No employee may be appointed except to a position which has been properly established and approved by the Department of Finance to fix its class title, duration, organizational function, and the budget allotment from which the salary is payable."

Recommendation

Review the current number of Correctional Officer (CO) positions in the 918 blanket and determine current and future vacancies. Develop a plan to move excess COs from the 918 blanket into permanent full-time or fractional positions established by the Department of Finance (DOF).

2. Performance Reports

Probation Reports and IDP's are not prepared by supervisors for employees under their supervision. As of April 10, 2008, there are 515 reports outstanding that were due by January 31, 2008.

This condition results in employees unaware of their job performance and work expectations.

PTM, Section 900.1, Agency Responsibility, states in part, "...each State agency is responsible for the administration of the performance appraisal program for permanent and probation employee. The success of programs will depend

largely on the effectiveness of training provided in the agency for employees, supervisors, and management at all levels. Each agency shall adopt a system of performance appraisals in accordance with the rules of the State Personnel Board.”

Recommendation

Establish a procedure to ensure that performance reports and IDPs are completed in a timely manner.

3. Organizational Charts

Organizational Charts for Business Services are not always accurate. For example, the position numbers displayed as vacant are often filled and vice versa.

This condition makes it difficult to reconcile position numbers that employees are paid out of, actual budgeted positions, the reporting relationship, and ISP’s entire organizational structure.

CDCR Memorandum, Subject: CDCR Organizational Charts, dated December 13, 2007, states in part, “In accordance with the Delegation Program Agreement which exists between the CDCR and DPA...As a condition of the agreement, CDCR is required to maintain up-to-date staffing records and information, including organizational charts...”

Recommendation

Establish a master file of organizational charts and update as changes occur within the organization.

II. POLICIES AND PROCEDURES

DOM Supplements and OP’s are not always reviewed and updated on an annual basis. Of the 14 DOM Supplements reviewed nine are outdated and of the 42 OP’s reviewed 13 are outdated.

Dom Supplements and OPs may not provide current information/policy. As a result; staff may not follow update procedures relative to performing their jobs

SAM section 20050 states in part, “Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below: Policy and procedural or operational manuals are either not currently maintained or are nonexistent”.

Recommendation

Review DOM supplements and Ops annually and update as necessary.

III. HEALTH AND SAFETY

A. Environmental Health and Safety

1. Business Plan

The ISP Business Plan is not current, complete, neither approved nor signed by the Warden since either 2001 or 2004 before submission to Riverside County Certified Uniform Program Agency (CUPA) or Administering Agency (AA). Also, there are multiple versions. Major changes to the Business Plan occurred, but have not been updated, such as the name and the phone number of the emergency contacts (primary and secondary). The Spill Prevention, Control and Counter Measure Plan (SPCC) have never been formalized and adopted for the above ground and underground storage tanks (UST). There are no written monitoring procedures. The site map is not included.

This issue makes it difficult to determine accountability over the Business Plan and may result in an increased threat to life, health, and safety. In addition, this issue may be cause for revocation of the permit.

CCR, Title 19, Section 2729.2, states in part, "A business subject to the requirements of Section 2729.1 shall complete and submit to the Certified Uniformed Program Agency (CUPA) or Administering Agency (AA) the following to satisfy the inventory are (1) The Business Activities Page, (2) The hazardous materials – chemical description, (3) An annotated site map, forms described and their completion instructions. A site map (public document) and storage map (confidential document) must be included in the Business Plan." Riverside County Permit conditions states, "Major changes in the business plan, including the change of name or phone number of the 24 hour emergency contacts, must be reported to the CUPA or AA within thirty (30) days. The permitted must comply with, and maintain onsite, copies of a current permit and the attached: written monitoring procedures, emergency response plans, and a plot plan designating the location where monitoring will be performed."

Recommendation

Maintain a current/complete and approved Business Plan.

2. Hazardous Communication Program (Prior Finding)

The Audits Branch noted the following deficiencies regarding the Hazardous Communication Program:

Plumbing Shop A Yard

- The MSDS did not include an index.

Vector Control A Yard

- Daily/perpetual inventory of chemicals is not preformed.

Mechanical Shop

- Secondary containers are not labeled.

Vocational Bulk Janitorial

- MSDS are not maintained and updated.
- Indexing of MSDS binder is not standard and user friendly.
- Daily/perpetual inventory of chemicals is not preformed.

Vocational Masonry

- MSDS are not maintained and updated.
- The Chemical storage area did not have appropriate signage indicating possible hazard.

Vocation Refrigeration

- Daily/perpetual inventory of chemicals needed.
- MSDS are not maintained and updated.

Vocational Auto

- MSDS are not maintained and updated.
- Chemical storage area did not have appropriate signage indicating possible hazard.

Housing Unit A-1

- Indexing of the MSDS binder is not standard and user friendly.

Housing Unit D-1

- Indexing of the MSDS binder is not standard and user friendly.

These deficiencies could result in difficulties responding to a chemical breach which could cause an increased threat to life, health and safety.

CCR, Title 8, Section 5194, Hazard communication Program, states in part, "Department heads shall monitor daily compliance with this procedure in the areas of their responsibility...Each area supervisor shall ensure that every person required to work with or use hazardous, toxic, volatile substances is appropriately trained." DOM, Section 52030.2, states, "This procedure shall establish a method for the identification, receipt, training, issue, handling (or use), inventory and disposal of hazardous substances, which is in compliance with all federal, state and local laws or ordinances." DOM, Section 52030.4.1, states in part, "Maintain a constant daily inventory of all hazardous substances used or stored."

Recommendation

Adhere and comply with the Hazard Communication Program and the DOM by properly indexing and updating MSDS binders and performing daily inventories of chemicals.

3. Hazardous Waste Storage Site

The AB noted the following deficiencies regarding the Hazardous Waste Storage Site:

- Accumulation dates on the Fixer/Developer container exceeded the 90 day storage limit.
- A pallet of waste paints was left outside the storage area without waste labels or accumulation start dates.
- Waste paint containers were placed in drums without lids.

This condition could result in an increased threat to life, health and safety, fines and penalties and the hazardous management permit could be revoked.

CCR, Title 22, Section 66262.34(b) (2), states in part, "The first day the generator begins accumulating any hazardous waste, accumulation start date begins. DOM, Section 52030 and CCR, Title 22, Section 66263, states in part, "Containers are closed except when adding or removing waste...."

Recommendation

Adhere and comply with the Hazardous Waste Regulations and DOM, Section 52030, Control of Dangerous and Toxic Substances related to containers and storage.

B. Occupational Health and Safety

1. Injury and Illness Prevention Program

It does not appear that a complete and comprehensive IIPP has been established. The following eight elements should be included in the IIPP, Responsibility, Compliance, Communication, Hazard Assessment, Accident/Exposure Investigation, Hazard Correction, Training and Instruction, and Recordkeeping.

This issue could result in staff not conducting their jobs in a healthy and safe environment.

ISP, IIPP, Section IX, states in part, "...that documents related to the IIPP are maintained by the Safety Officer, Supervisor, RTWC, and IST. CCR, Title 8, Section 3203, states in part, "...management is responsible for ensuring that all safety and health policies and procedures are clearly communicated and understood by all employees...."

Recommendation

Comply with CCR, Title 8 and the IIPP section IX by providing a comprehensive IIPP.

2. Safety Committee Meetings

The required attendance by the safety committee members or designee is inconsistent at the monthly meetings. For example, some meetings have four attendees and some have fifteen. In addition, members have not been appointed and it is difficult to determine who is a member of the safety committee.

This condition results in day to day safety issues not being raised and possibly resolved. Also, this issue gives the appearance that the ISP safety committee is given a low priority.

The ISP IIPP, Institution Safety committee (ISC) states in part, "The ISC meets monthly and includes the ISP safety officer...Appointments to the ISC for CDCR staff may rotate periodically; however attendance by the appointed member or alternate is required at the monthly meeting. The Associate Warden or Manager of the listed areas shall send an appointment memorandum at the time of initial appointment and when replacements are made. The safety officer shall notify the Warden if no appointment is made to a vacant position within 60 calendar days of becoming vacant."

Recommendation

Appoint employees to be members of the ISC. Ensure safety committee members or designee attends the safety committee meetings as required.

3. Exposure Control Plan (ECP)

ISP's written site specific ECP has not been updated since 2003. The updates should include, but not limited to, the current post exposure providers, locations of PPE and Infection control practice and/or policy and procedures for handling soiled linen.

This condition could result in staff coming in contact with hazardous substances that may transmit diseases.

ISP, Blood Borne Pathogens (BBP) and ECP, Review and Update of the ECP, Page 2.8, states, "The department recognizes the importance of keeping the ECP up-to-date. This will be the responsibility of the Exposure Control Facilitator (ECF) and the Exposure Control Committee (ECC). All proposed changes should be submitted to the PHS for review and approval. The PHS is responsible for providing updates and revisions as necessary. The ECP shall be reviewed and updated under the following circumstances:

A. Annually;

B. When new or modified task and procedures are implemented;

- C. When new and functional positions or job classifications within the institution or division are established, which may involve possible exposure to BBP;
- D. On a regular basis to review engineering and work practices controls their regularly scheduled maintenance logs, and to update them to ensure their effectiveness;
- E. In response to data gathered since the last update regarding exposure incidents documented on the sharps injury log;
- F. In response to any information received regarding possible deficiencies or needed improvements; and
- G. To assess progress made in environmental controls for the purpose of decreasing risk to BBP.”

Recommendation

Adhere and comply with the ISP BBP and ECP program and the MWMA, Section(s) 117600 – 118360, by updating the ECP on an annual basis.

4. Workplace Hazards

The system for identifying and communicating work place hazards is not in place in accordance to the LAC-IIPP. Staff is not supplied with access to current hazard information pertinent to their work assignments. We noted that the Codes of Safe practices and Hazard Evaluations are incomplete. They are missing the date prepared and the name and title of the preparer.

This issue could result in injuries and difficulties determining who prepared the codes, and the date of last review

CCR, Title 22

Recommendation

Review the current location of the sharps container and determine the best location for storing sharps to ensure that the risk of employees coming in contact with sharps is minimized.

5. Bio-Hazardous Waste

A sharps container for the disposal of bio-hazardous waste is not easily accessible in the A facility clinic.

This issue increases the risk of employees coming in contact with hazardous substances that may transmit diseases.

CCR, Title 22 (*researching code*)

Recommendation

IV. INTERNAL CONTROL

A. Non-Drug Medical (Prior Finding)

1. Non-Drug Medical Warehouse

The non-drug medical warehouse has the following deficiencies Inventory reconciliations are not performed.

- Stock records are not maintained.
- Access is not adequately controlled.
- Separation of duties is inadequate.
- Shelves are not adequately labeled.

These issues result in the late detection of errors, irregularities, theft and/or misappropriation.

DOM, Section 22030.11.8, states, "A count of every inventory item held in storage shall be taken annually on all materials in all warehouses, storerooms, and maintenance shop storage areas. More frequent inventories are acceptable if experience indicates that reducing the interval between physical inventories shall result in less time being consumed in the reconciliation of records." DOM, Section 22030.10.1, states, "Stock records shall be maintained by using a manual card or computerized inventory control system." DOM, Section 22030.11.1, states in part, "At all facilities used to store and distribute materials, entry/exit controls shall be in place to restrict unauthorized personnel from having access to the inventory...." SAM, Section 20050, states in part, "...the elements of a satisfactory system of internal accounting and administrative controls, shall include, but are not limited to: plan of organization that provides segregation of duties appropriate for proper safeguarding of state assets...." DOM, Section 22030.11.6, states, "All shelves, bins, and bulk cartons shall be stock numbered to identify the items being stored."

Recommendation

Perform inventory reconciliations as required. Ensure that all supplies are accounted for in an automated inventory system. Segregate duties to ensure that no one person has significant control over central supply functions. Label all shelves so that supplies can be easily identified.

B. Inmate Trust Accounting

1. Cash Payment Fund Reconciliation

Twenty-nine Cash Payment Fund Reconciliation sheets tested for a six-month period (September 28, 2007 through March 27, 2008) were not reviewed and signed by the supervisor.

This condition may result in late detection of errors and irregularities.

SAM, Section 7908, states, "All reconciliations will show the preparer's name, reviewer's name, date prepared and date reviewed."

Recommendation

Review and sign all reconciliations inclusive of the cash payment fund reconciliation.

2. Separation of Duties

Separation of Duties is inadequate when the person who prepares Bank Reconciliations has access to blank check stock. Exacerbating this practice is that at times this person may prepare the log of issued and written checks, void checks, approve deposits, prepare deposits and go to the bank.

This condition may result in late detection of errors, irregularities, theft and misappropriation.

SAM, Section 8080, states in part, "...A key element in a system of internal control is separation of duties. This section provides the appropriate level of separation of duties...No one person will perform more than one of the following types of duties: ...preparing bank reconciliations and having access to blank check stock.

Recommendation

Separate duties so that no one person has significant control over cash transactions.

C. Support Warehouse

1. Inventory Adjustments

Inventory adjustments are posted prior to approval by the business manager.

This condition could result in late detection of errors, irregularities, theft and/or misappropriation.

SAM, Section 10860, states in part, "The business manager...will authorize the adjustment...The accounting office will post the adjustment authorized by the business manager...."

Recommendation

Ensure adjustments are approved prior to posting.

V. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel

1. Attendance Records

The attendance records do not reflect accurate time used. For example, when an employee does not have sufficient leave balances and is docked, the dates of dock are not recorded on the timesheets. Also, the Personnel Post Assignment System (PPAS) does not reflect the changes made to leave credits used when an employee opts to use leave credits verses dock. In addition, employees are not required to submit their CDC 998-A's when on long term sick leave until they return to work.

This practice results in late detection of inappropriate use of leave and inaccurate attendance records.

Administrative Bulletin 04-01, Attendance Record Policy – BU 06 and Aligned Non-Represented Employees, states in part, "...The DPA Rules, Sections 599.665 and 599.702, Government Code Section 19849, and the Fair Labor Standards Act (FLSA), Chapter VI, requires all departments to maintain complete and accurate time and attendance records for each employee covered by the FLSA. CDC's policy established a process and time frame for submitting time and attendance record to the Personnel Office to meet mandates requirements...."

Recommendation

Provide training to ensure that this policy is followed and correct leave records to reflect accurate attendance records. Also, monitor for compliance.

2. 912 Blanket Payments

Twenty-one Leave Buy Back payments were issued out of the 912 blanket verses the 669 blanket serial number.

This practice results in payments charged to the incorrect blanket. Therefore, expenditures may be over or understated on the year-end reports.

An email from the Section Chief, Adult Operations, Office of Personnel Services, dated May 17, 2007, Leave Buy Back Instructions for Personnel Officer/Specialists/Timekeepers, states, "Key from blanket serial number 669 (this will allow tracking for budget costing and year end reports) if you have already begun to key this pay without using this serial number, please do a transfer of funds to the serial number 669 so the monies are contained in this fund."

Recommendation

Review the email dated May 17, 2007. Prepare a transfer of funds to serial number 669 for the 21 payments identified above.

3. Periodic Position Control Report

The Periodic Position Control Report, dated March 1, 2008, notes 33 positions, 17 of the positions are over expended. For example, overtime payments should be issued out of the 901 blanket verses the serial number. In addition, three fractional positions have been over expended.

This practice results in the over expending of the budget authority.

PPM, Periodic Position Control Report Monthly, Section C309, states in part, "...Periodic Position Control Report lists each position in which personnel-months expended exceed personnel-months authorized by form Std. 607; i.e., payments were issued from unauthorized positions...."

Recommendation

Review the Periodic Position Control Report and make corrections as necessary. Also provide training and monitor for compliance.

4. Prevailing Wage Sheets for Casual Laborers

Two Casual Laborer's transactions were reviewed and the PWS's from the DIR are not being used to determine that the correct hourly rate is applied to the Casual Laborer classification.

This condition results in incorrect payment of wages, benefits, possible overpayments and employees may be unable to collect their unemployment benefits.

Personnel/Payroll Services Guidelines, Section A600, Casual Trades Employees, Section 110, Prevailing Wage Sheets, states in part, "...The PWS's must be used in conjunction with the appropriate casual trades union contracts to ensure that employees receive the most current salary and benefit rates...."

Recommendation

Obtain the current PWS from the DIR and reconcile to wages and benefits paid. In addition, contact Inmate Day Labor for separation notification for those laborers that are no longer working. Also, provide training to personnel staff and monitor for compliance.

B. Support Warehouse

1. Order for Storeroom Supplies (Std. Form 115)

The Order for Storeroom Supplies, Std. Form 115 is not always filled out completely. Thirty, Std. 115's were sampled, of which 23 had at least one incomplete field. Some of the fields include: approver signature, signature of the requestor and signature of the receiver.

This condition results in unauthorized requests, and late detection of errors, irregularities, theft and/or misappropriation.

DOM, Section 22030.11.7, Distribution of Material states, "Materials shall be issued from warehouses on a STD Form 115, Order for Storeroom Supplies, or a local form that contains the same basic information as the STD Form 115. The requisition shall show the date of the requisition, the unit to be charged, the stock item number and description, quantity ordered, and signature of requester. The requisition shall be signed by the approving officer..."

Recommendation

Ensure Std. 115's are filled out completely and accurately.

C. Plant Operations

1. Work Orders

Completed work orders are not documented as complete or are they reviewed and turned in for input to the SAPMS coordinator in a timely manner. The AB noted multiple inputs on the same day on asset history reports. In addition, there is a backlog of over 2100 work orders that have been outstanding for over 90 days.

This issue may result in supervisors not aware of the status of work orders and the POM report may not accurately reflect plant operations activities.

ISP work order procedure, Section F, states, "The tradesperson completing the work will complete the labor and material portion of the work order. The work order is returned to the tradesperson's supervisor. The supervisor will review the completed information and route the work order back to the work order desk."

Recommendation

Ensure that work orders are reviewed by supervisors, fully completed, signed, dated and returned in a timely manner.

2. Plant Operations Maintenance Report (POM)

The POM does not accurately reflect plant operations activities. For example, total hours are understated by 5,000 hours for the period of September 2007 – March 2008. The POM is not reviewed by management. Additionally, there is 2,700 hours of overtime totaling \$116,453 that is not reflected on the POM.

This practice results in inaccurate reports provided to management and the Central Office Maintenance Unit.

The DOM, Section 11010.21.4, states in part, “Compile information for monthly reports as appropriate.” SAPMS guidelines, states in part, “Routing copies of the report to the following: Warden, Correctional Administrator, Business Services, Correctional Plant Manager....”

Recommendation

Route, validate, and review reports to determine that they accurately reflect Plant Operations activities.

D. Food Services (Prior Finding)

1. Inmate Timekeeping

The following deficiencies are noted related to inmate timekeeping in the Central Kitchen, and Facilities B, C, and E:

- There is no documentation for the use of “S” time.
- CDCR 1697s are not signed by supervisors.
- Transfer in and DMS numbers were not filled in on many of the CDCR 1697’s reviewed.
- Time worked is incomplete.
Some documentation is inaccurate (i.e., time worked on RDO’s was not documented).

This condition results in increased errors, increased workload, and possible delay in processing inmate pay.

CCR, Title 15, Section 3045 and ISP’s IW/TIP handbook pages 16 through 18, provide the requirements for processing the CDCR 1697s.

Recommendation

Document inmate time worked in accordance to the requirements spelled out by the IW/TIP guidelines. Provide training as necessary and monitor for compliance.

2. Temperature Logs

Temperature logs are not maintained for the Central Kitchen scullery

This condition could result in late detection of equipment malfunction.

DOM, Section 54080.20, Health and Safety Law and Regulations, states in part, "The temperature of refrigeration units and dishwashing machines shall be recorded daily on the log maintained by the CFM for a minimum of two years...."

Recommendation

Ensure that pre-washing, washing, rinsing, and sanitizing temperatures are logged and maintained for each shift on a daily basis.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

IRONWOOD STATE PRISON

GLOSSARY

AB	Administrative Bulletin
CAP	Corrective Action Plan
CDC 1697	Inmate Timecard
CDC 998-A	Employee Attendance Records and PALS Worksheet
CDCR	California Department of Corrections and Rehabilitation
CFM	Correctional Food Manager
DIR	Daily Inventory Record
CRFC	California Retail Food Code
DMS	Daily Movement Sheet
DPA	Department of Personnel Administration
DOM	Department Operations Manual
ECC	Exposure Control Committee
ECF	Exposure Control Facilitator
ECP	Exposure Control Plan
FIM	Financial Information Memorandum
FLSA	Fair Labor Standards Act
GC	Government Code
IB	Informational Bulletin
IDL	Inmate Day Laborer
ISP	Ironwood State Prison
ITAOOG	Inmate Trust Accounting Office Operational Guide
ITAS	Inmate Trust Accounting System
ITFM	Inmate Trust Fund Manual
ML	Military Leave
MLD	Military Leave Drill
OAC	Office of Audits and Compliance
OP	Operational Procedure
OPF	Official Personnel File
PPAS	Personnel Post Assignment System
PPC	Periodic Position Control
PPM	Payroll Procedures Manual
PWS	Prevailing Wage Sheets
SLAMM	State Logistics and Materials Management
Std. Form 115	Order for Storeroom Supplies
Std. Form 607	Change in Established Position

SAMPLE FORMAT CORRECTIVE ACTION PLAN				
Item #	Audit Finding	Responsible Personnel	Proposed Action	Date to be Completed
A.1	WRITTEN NOTICE Of the 30 records reviewed, 24 (80 percent) contained a clearly stated date and reasons for placement in part I, Notice of Reasons for Placement date. The remaining three records failed to clearly document the reason for placement in sufficient detail to enable the inmate to prepare a response or defense.	Facility Captain Do Not use individuals names and do Not use Acronyms.)	A. Facility Captains will ensure that each inmate placed in Administrative Segregation will have the placement date included on all CDC 114-Ds processed. B. Training will be provided by the Facility Captains to ensure sufficient information is documented in abundant detail in order for an inmate to articulate a response or defense	2/2/2006

California Department of Corrections and Rehabilitation
Office of Audits and Compliance
Information Security Branch



Information Security Compliance Review
Ironwood State Prison
October 7-8, 2008

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**Information Security Compliance Review
Ironwood State Prison
February 27 through March 2, 2008**

The Office of Audits and Compliance (OAC) Information Security Branch (ISB) conducted an Information Security Compliance Review at Ironwood State Prison between February 27 and March 2, 2008. The review covered 16 different areas. Ironwood State Prison was fully compliant in 1 area, partially compliant in 5 areas, and non-compliant in 10 areas. The overall score is 64 percent. The chart below details these outcomes. Other observations are also noted.

FINDINGS SUMMARY:

		Score	Compliant	Partial Compliance	Non Compliant
STAFF COMPUTING ENVIRONMENT					
1.	Use Agreement (Form 1857) is on file.	78%		P	
2.	Test not performed	NA ^[2]			
3.	Information security training is current.	61%			NC
4.	Staff log on using own password.	100%	C		
5.	Network access authorization is on file.	86%		P	
6.	Physical locations of CPUs agree to inventory records.	80%		P	
7.	Staff CPUs labeled "No Inmate Access."	86%		P	
8.	Staff monitors are not visible to inmates.	86%		P	
9.	Anti virus updates are current.	38%			NC
10.	Test not performed	NA ^[2]			

INMATE COMPUTING ENVIRONMENT (Education, Library, Clerks)					
11.	Physical location of CPUs agrees to inventory records.	55% ^[1]			NC
12.	CPU labeled as inmate computer.	64%			NC
13.	Anti virus updates are current.	0%			NC
14.	Inmate monitors are visible to supervisor.	55%			NC
15.	Portable media is controlled.	43%			NC
16.	Telecommunications access is restricted.	64%			NC
17.	Operating system access is restricted.	64%			NC
18.	Printer access is restricted.	64%			NC

Total of Tests	16	1	5	10
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Overall Percentage 64%^[1]

^[1] Scores for computer-related tests reflect the test results on the locatable sample computers only. The auditors' confidence level of these scores is low regarding the inmate computers because only 55% of the sample computers could be located.

^[2] Tests #2 and #10 were not performed at ISP.

**Information Security Compliance Review
Ironwood State Prison
February 27 through March 2, 2008**

OBJECTIVES, SCOPE AND METHODOLOGY

The objectives of the Information Security Compliance Review were to:

- Assess compliance to selected information security requirements,
- Evaluate other conditions discovered during the course of fieldwork that may jeopardize the security of information assets of the facility or of the Department, and
- Provide information security training for management and staff.

The Information Security Branch (ISB) did not review any Prison Industry Authority computers.

In conducting the fieldwork the ISB performed the following procedures:

- Interviewed senior management, information technology staff, institutional staff, and computer users.
- Asked staff to provide evidence that all authorized computer users had Acceptable Use Agreement forms and appropriate training support documentation on file.
- Tested selected information security attributes of users and IT equipment using three different population samples. This included both the staff and inmate computing environments.
- Reviewed various laws, policies and procedures, and other criteria related to information security in the custody environment.
- Conducted physical inspection of selected computers.
- Observed the activities of the information technology support staff.
- Analyzed the information gathered through the above processes and formulated conclusions.

FINDINGS AND RECOMMENDATIONS

The ISB provided a copy of our review guide to your IT staff. It contains criteria and detailed methodology. That information, therefore, is not duplicated under each finding.

ISB's findings and recommendations are listed below. ISB staff discussed them with management in an exit conference following our fieldwork. Please contact us if you would like to discuss further any of these issues.

**Information Security Compliance Review
Ironwood State Prison
February 27 through March 2, 2008**

1. **Test # 1: The “Computing Technology Use Agreement” forms (CDC 1857) were not included in the employee personnel file. (78 percent compliance)**

Recommendation: Include the original Form 1857 in the employee’s Official Personnel File (OPF). (DOM, Section 48010.4.7)

2. **Test # 3: Information Security training was not current for all computer users including staff and contractors. (61 percent compliance)**

Recommendation: Review information security training procedures and training records maintenance. Require that all computer users receive annual information security training. Require appropriate documentation of the training. (DOM, Section 49020.14.1, 41030.1)

3. **Test # 5: Former employees still had network access authorization. (86 percent compliance)**

Recommendation: Access to any California Department of Corrections and Rehabilitation (CDCR) computerized information is restricted to authorized persons. The sensitive nature of CDCR data requires strict controls over who is allowed access to it. (DOM, Section 49020.10). Verify that all former employees have been removed from Active Directory.

Best Practice: Enforce current formal reporting procedure so that all staff employment and job duty changes are reported to the IT Coordinator.

4. **Test # 6: Physical locations of staff computers did not agree to inventory records. (80 percent compliance)**

Recommendation: Maintain accurate inventory records. (DOM, Sections 46030.1, 49010.4)

5. **Test # 7: Staff monitors and computers are not correctly labeled, “No Inmate Access.” (86 percent compliance)**

Recommendation: Each computer in a facility shall be labeled to indicate whether or not inmate access is authorized. (California Code and Regulations, Title 15, Section 3041.3(d) and DOM Sections 49020.18.3, 42020.6)

Best Practice: Affix appropriate labels to both the monitor and the Central Processing Unit (CPU).

**Information Security Compliance Review
Ironwood State Prison
February 27 through March 2, 2008**

- 6. Test # 8: Staff monitors are visible to inmates. (86 percent compliance)**

Recommendation: Reposition staff monitors or use privacy screens to shield monitors from inmate view. (DOM, Section 47040.3, 49010.1)

- 7. Test # 9: All staff computers did not have up-to-date antivirus software. (38 percent compliance)**

Recommendation: Update antivirus software on all staff computers. (DOM, Section 48010.9)

- 8. Test # 11: Physical locations of inmate computers did not agree to inventory records. (55 percent compliance)**

11.

Recommendation: Maintain accurate inventory records of all inmate computers. (DOM, Sections 46030.1, 49010.4)

- 9. Test # 12: Inmate computers are not labeled for inmate use only. (64 percent compliance)**

Recommendation: Affix proper labels to all inmate monitors. (DOM, Sections 49020.18.3, 42020.6)

- 10. Test # 13: No inmate computers had up-to-date antivirus software. (0 percent compliance).**

Recommendation: Update antivirus software on all inmate computers. (DOM, Section 48010.9)

- 11. Test # 14: Inmate computer monitors are not visible to the supervisor (55 percent compliance)**

Recommendation: The approved uses of workstations by inmates shall be carried out only under very tightly controlled circumstances. Inmates using computers must be under "direct and constant supervision." (DOM, Section 49020.18.3)

Best Practice: Position all inmate monitors so that the supervisor can see the screen easily.

**Information Security Compliance Review
Ironwood State Prison
February 27 through March 2, 2008**

12. Test # 15: Portable media is not controlled. (43 percent compliance)

Recommendation: Portable media must be tightly controlled and should not be allowed outside of controlled inmate work areas.
(DOM, Section 49020.18.3)

13. Test # 16: Inmate access to telecommunication devices is not restricted. (64 percent compliance)

Recommendation: Inmate access to outside telephone lines, fax machines, and network connections must be restricted.
(DOM, Section 49020.18.3)

14. Test # 17: Inmate access to the operating system is not restricted. (64 percent compliance)

Recommendation: Access to the operating system must be tightly controlled. Prohibit inmate access to the operating system.
(DOM, Section 49020.18.3)

15. Test # 18: Inmate access to printers is not restricted. (64 percent compliance)

Recommendation: Reports and other printed output from inmate-utilized computers shall be reviewed closely by staff, and appropriate distribution of all printed material shall be monitored. (DOM, Section 49020.18.3)

OTHER OBSERVATIONS:

Observation 1: Critical data in some areas was not backed up.

Recommendation: Each department manager should identify all data that is critical to their operations, including locally created databases, and develop the needed back-up and restoration procedures. A back up schedule should be established and enforced. (DOM, Section 48010.9.3)

Observation 2: Software licensing records are not maintained.

Recommendation: Maintain an inventory of licensed software.
(DOM, Section 48010.14)

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

EDUCATION
COMPLIANCE

IRONWOOD STATE PRISON

APRIL 1 THROUGH APRIL 11, 2008



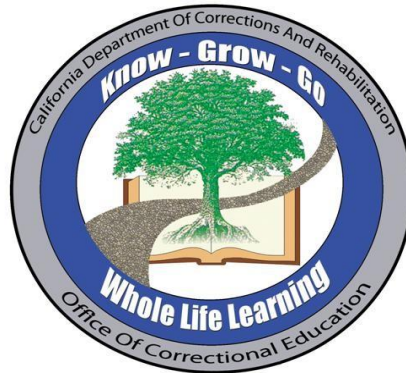
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EDUCATIONAL COMPLIANCE BRANCH

DEPARTMENT OF CORRECTIONS AND REHABILITATION

OFFICE OF AUDITS AND COMPLIANCE

EDUCATIONAL COMPLIANCE BRANCH



COMPLIANCE REVIEW FINDINGS

Ironwood State Prison

April 7 through 11, 2008

ADMINISTRATION

G. Lynn Hada

ACADEMIC EDUCATION

John Jackson, Raul Romero

VOCATIONAL EDUCATION

Beverly Penland, Dale Manners

LIBRARY

Christine Long

FEDERAL SUPPLEMENTARY PROGRAMS

Mark Lechich-WIA

Ron Callison-VTEA

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

No.	INSTITUTION: ISP DATE: April 7-11, 2008 COMPLIANCE TEAM: G. Lynn Hada	Yes/No or NA	COMMENTS
1.	Allotments/Operating Expenses:	Yes	
	<ul style="list-style-type: none"> Does the Principal maintain a budget tracking system to monitor the school departments' complete budget? Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance? 		
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?	Yes	
3.	Are funds allocated by Office of Correctional Education available and spent within program areas?	Yes	
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by Office of Correctional Education?	Yes	
5.	Are allocated funds for the Bridging Education Programs including Arts In Corrections (AIC) used to provide program services to inmates?	Yes	
6.	Are law library purchases funded by the institution's general budget?	No	There is an ongoing attempt by CDCR Administration to resolve the use of Program 25 vs. Program 45 monies to operate Law Libraries. The ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs headquarters staff.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006, instructions when filling vacancies?	No	The principal did not have a copy of the memo and was not familiar with it. However most of the hiring steps are being followed.
8.	Are the Education Monthly Report (EMR) and the Education Daily Report (EDR) accurate and being completed and submitted on a timely basis?	No	The EMR is not always accurate, even though it is being submitted on a timely basis. The EDR is accurate and submitted on a daily basis.
9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the Television Specialist?	Yes	
10.	<div>Credentials:</div> Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	Yes	
11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	Yes	
12.	<div>Duty Statements:</div> Are 100% of the staff duty statements on file and applicable to current position?	Yes	
13.	<div>Operational Procedures:</div> Does the institution have an Operational Procedure that addresses the legislative mandates of the Bridging Education Program?	No	The current copy Operational Procedure is outdated (dated December 2005.)

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

14.	<ul style="list-style-type: none"> Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion? 	No	The Educational Operational Procedure refers to Chapter 5 of the Department Operations Manual. It also needs to be revised because of references to various types of leave usage procedures not permitted under the current teachers' union contract.
15.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;">Staff Assignments:</div> Does the Principal maintain a current and complete list of all authorized positions and their status?	Yes	
16.	Are all staff appropriately working and/or assigned within the education program?	No	The teacher assigned to the Distance Learning funded position is working only on the college program rather than the programs described in the job description.
17.	Do all staff within the education program report to, and are under the Principal's supervision?	Yes	
18.	Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?	Yes	
19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program (BEP)?	Yes	
20.	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	Yes	
21.	Has the Artist Facilitator been officially assigned to the Education Department?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	N/A	
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	Yes	The Plant Operations Electronic Technician.
24	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	No	The Alternate Education Delivery Model procedure which contains the plan has not been signed by all of the required stakeholders and therefore the plan is not implemented.
25	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	Yes	
26.	<div style="border: 1px solid black; padding: 2px;">Alternative Education Delivery Model (AEDM):</div> Is an approved Alternative Education Delivery Model Operational Procedure in place?	No	The Alternate Education Delivery Model procedure, which contains the plan, has not been signed by all of the required stakeholders and therefore is not in place.
27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure per the Suzan Hubbard memo dated May 5, 2005?	No	There has not been an agreement reached with the California Correctional Peace Officers Association at ISP. Therefore the school is not in compliance with Suzan Hubbard's memo requiring Alternate Education Delivery Model implementation.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

28.	Are all Alternative Education Delivery Model positions filled?	No	The Alternate Education Delivery Model procedure has not been signed by all of the required stakeholders and implemented. There has not been an agreement reached with the California Correctional Peace Officers Association at ISP. However the two Distance Learning and Independent Study positions have teachers in those position numbers.
29.	Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?	No	The Alternate Education Delivery Model procedure has not been signed by all of the required stakeholders and implemented. There has not been an agreement reached with the California Correctional Peace Officers Association at ISP.
30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	No	The Alternate Education Delivery Model procedure has not been signed by all of the required stakeholders and implemented. There has not been an agreement reached with the California Correctional Peace Officers Association at ISP.
31.	<ul style="list-style-type: none"> Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted? 	No	The Alternate Education Delivery Model procedure has not been signed by all of the required stakeholders and implemented. There has not been an agreement reached with the California Correctional Peace Officers Association at ISP.
32.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	N/A	
34.	<div style="border: 1px solid black; padding: 2px;">Certificates of Completion or Achievement:</div> <ul style="list-style-type: none"> Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system? Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned? 	Yes	
35.	<div style="border: 1px solid black; padding: 2px;">Executive/Supervisory Assignments:</div> <p>Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)</p>	Yes	
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	
37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	No	At least one supervisor is lacking classroom visitations records.
38.	<ul style="list-style-type: none"> Does the Academic Vice Principal/Vocational Vice Principal provide documented In-Service-Training and On-the-Job-Training? Are all probationary and annual performance evaluations currently due completed? 	No	On-the-Job-Training for new teachers does not always occur. Annual performance reviews are not all current.
39.	Are supervisors documenting contact with staff and inmates involved in the bridging program?	No	Contact with inmates in the Bridging Education Program is not documented. Contact with staff is appropriately documented.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

40.	Are Transforming Lives Network quarterly reports being submitted to Office of Correctional Education by the due dates of Oct. 10, January 10, April 10 and July 10?	Yes	However, the report for March 2008 is very incomplete/inaccurate.
41.	<div>Test of Adult Basic Education:</div> <ul style="list-style-type: none"> Is the Principal trouble shooting Test of Adult Basic Education score losses identified on the School Program Assessment Report Card (SPARC)? Is the principal implementing remedial changes to improve the scores? 	Yes	
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes	
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	Yes	
44.	<div>Accreditation:</div> <p>Has the education program been accredited by Western Association of Schools and Colleges (WASC), or has the application for accreditation been submitted to Western Association of Schools and Colleges?</p>	Yes	
45.	<ul style="list-style-type: none"> Is there a continuing Western Association of Schools and Colleges process being followed by the school with the action plans being actively addressed in a timely manner. Is there a leadership team in place and do minutes substantiate regular meetings? 	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

46.	Inmate Enrollment/Attendance:	Yes	
	Do Academic, Vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?		
47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	No	The inmate assignment staff has not developed an eligibility list.
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	It is a recent practice for the Principal to maintain a copy of the current inmate assignment waiting list..
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	No	The Initial Classification Committee meets at such variable times that the education department has not attended.
50.	Bridging Program:	Yes	
	Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?		
51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	No	An education orientation packet is not included in the standard orientation package. There is no waiting list generated by the Inmate Assignment Office staff so the education department does not know which inmates are eligible for at least two weeks after arrival by which time the deadlines have passed.
52.	Transitional Living Network (TLN):	Yes	
	Has the Transforming Lives Network satellite dish been installed and operational?		

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

53	Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator?	No	The Literacy Coordinator is not the Academic Vice-Principal and an Academic Vice-Principal is not designated as the Transforming Lives Network coordinator.
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education?	No	The Education Monthly Report shows an enrollment of zero. There is no tracking of enrollment or completion of the Transforming Lives Network courses.
55.	Has Transforming Lives Network enrollment and completion data been tracked?	No	The enrollment and completion data is not tracked.
56.	<div style="border: 1px solid black; padding: 2px;">GED Testing/High School Credit:</div> <ul style="list-style-type: none"> Is there a High School credit program and General Educational Development (GED) Testing program that follows Office of Correctional Education and State requirements? Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates? 	No	The school only has Adult Basic Education III classes and General Education Development classes. There is no high school credit program and no high school credits are being issued even to students earning them.
57.	<div style="border: 1px solid black; padding: 2px;">Inmate Education Advisory Committee:</div> <p>Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?</p>	No	The Inmate Education Advisory Committee does not meet regularly and not on all yards.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

58.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Education Files</div> <ul style="list-style-type: none"> • Do all of the quarterly California Department of Corrections and Rehabilitation 128E and 154 or other official student school transcripts reports contain current and appropriate information that includes credits earned, course completions? • Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.) • Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? 	No	Five academic files were randomly selected and audited. The first file had two different inmates with the same last name and different California Department of Corrections and Rehabilitation numbers records mixed in the same file. The second file had not been updated for more than a year. The final three files were blank except for the student's name and number, even though the students had been assigned for more than four months. Several vocational files were randomly selected, three files had small errors, and the others were good,.
59.	<ul style="list-style-type: none"> • Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation 154) transferred to Central Records when a student leaves education, transfers or paroles? • Is there a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) (or High School Transcript) kept in the Education Office files in perpetuity? • Are Education Files prepared for all assigned inmates? • Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and transferred to the General Population receiving institution? 	No	Education files are usually mailed rather than being transferred to Central Records. The keeping of a copy of the Form 154 has only recently been started. Bridging Education Program Education files are usually received weeks late from the sending institution.
60.	If there are any contracted, Office of Correctional Education sponsored or special programs operating at the institution, have the teachers assigned to these programs received special/related training?	N/A	
61.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Literacy:</div> <p>Are literacy programs available to at least 60% of the eligible prison population?</p>	No	Per the Education Monthly Report, literacy services are available to only 42.5 percent of the eligible prison's inmate population.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	No	The last meeting records are from March,2007. During the last several meetings only education staff attended rather than a selection of institution personnel as required by the 1998 Statewide Literacy Plan.
63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	No	There no mention of the Bridging Education Program issues in any available minutes.
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	Yes	
65.	Is there an established procedure for placing students into any existing Learning Literacy (LLL) lab? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	Yes	Inmates voluntarily sign-up through a sign-up sheet in the library.
66.	<div style="border: 1px solid black; padding: 2px;">Developmental Disability Program and Disability Placement Program Programs:</div> <p>If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/Office of Correctional Education policies?</p>	N/A	
67.	<div style="border: 1px solid black; padding: 2px;">ESTELLE/Behavior Modification Programs:</div> <p>Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	N/A	
69.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment: </div> Is there an approved Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?	N/A	
70.	Are all Recidivism and Reduction Strategy (RRS) Assessment positions filled (part of Correctional Offender Management Profiling for Alternative Sanctions)?	N/A	
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	
72.	Do all designated assessment staff have an individual Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) log-on code? Is the security of the code maintained?	N/A	
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

74.	Recidivism Reduction Strategies: <ul style="list-style-type: none"> Is there a Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)? Are inventories of Recidivism Reduction Strategies equipment maintained and current? 	No	There was no tracking log available.
75.	Recidivism Reduction Strategies Enhanced Outpatient Program: <p>Are all Enhanced Outpatient Program staff hired and in place?</p>	N/A	
76.	Does the Principal (via the Academic Vice-Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with California Department of Corrections and Rehabilitation policy?	N/A	
77.	Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?	N/A	
78.	Multi-Agency Re-entry Program (SB 618): <p>Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?</p>	N/A	
79.	Are the four vocational programs referenced in Senate Bill 618 in place at the institution?	N/A	
80.	Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

81.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Vocational-Recidivism Reduction Strategies</div> <p>Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?</p>	N/A	
82.	<p>Are all Recidivism Reduction Strategies vocational classes at full enrollment?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

NO.	INSTITUTION: ISP DATE: April 7-11, 2008 COMPLIANCE TEAM: John Jackson, Raul Romero	Yes/No or N/A	COMMENTS
1.	Student Job Descriptions: Are all of the inmate students' job descriptions accurate, complete, signed, and available?	Yes	All reviewed files have job descriptions that accurate, complete, signed, and available
2.	Student Records/Achievements: Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?	No	Most teachers have Test of Adult Basic Education Test results in the student files and some do not. Some of the files contained scores dated October 2007. There are current test scores available from recently completed testing. It is recommended that Test of Adult Basic Education testing scores be posted via 128-E chronological reports in the student files as well as the pre-post subtest diagnostic reports as required by Office of Correctional Education policy.
3.	Are all of the California Department of Corrections and Rehabilitation 128-E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	No	Most teachers have all the appropriate documentation, others do not. It is recommended that supervisors review all student records maintained by teachers under their supervision to ensure that teachers understand the documentation requirements and that all student files contain the required documents.
4.	Is 100 perecent of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current?	Yes	All files reviewed have Is 100 percent of the California Department of Corrections and Rehabilitation curriculum recording system in-use. It is recommended that supervisors do check accuracy, and currency at least quarterly in comparison with information posted on the CDCR 154 Card in the Education File...

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

5.	Do 100 percent of the Permanent Class Record Cards (California Department of Corrections and Rehabilitation-151 form) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?	Yes	The timekeeping documents indicated the required number of hours in attendance, were accurate, and current. However, teachers were cautioned to accurately report any late arrivals and/or early releases due to control movement problems as "S" time...
6.	Are Certificates of Completion or Achievement being issued to those students earning them?	No	Most teachers do not issue certificates of Achievement or Completion. Most teachers are not aware of the policy regarding the issuance of certificates. It is recommended that supervisors provide copies of the certificate issuance policy memo to all teachers. One of the teachers stated that he did not issue certificates because of a lack of access to develop certificates.
7.	<div>Instructional Expectations:</div> Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?	No	Most teachers have some form of lesson plan either from the textbook series such as Saxon Math or other curriculum. Some teachers do not have any lesson plans that can be used by a relief instructor or that can provide students and idea of daily, weekly, or monthly classroom activities.
8	Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?	No	The teachers had no knowledge or understanding of the process; and he did not know that they can issue credits for completed work.
9.	Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum?	Yes	Teachers have copies of the CDCR OCE issued curriculum frameworks. It is recommended that teachers follow course guidelines as a whole and not just teaching limited strand such as just math within an ABE classroom.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

10.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Bridging Education Program Instructional Expectations:</div> <p>Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher have a copy of the curriculum?</p>	Yes	The teacher is utilizing the established curriculum for Bridging Education Program and the teacher has a copy of the curriculum.
11.	Are the Test of Adult Basic Education and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?	No	There is an apparent lack of consistency in Test of Adult Basic Education testing of inmates with no Test of Adult Basic Education scores at ISP. The Test of Adult Basic Education testing process must be developed to meet Office of Correctional Education requirements and ISP student needs. Some Comprehensive Adult Student Assessment System testing is taking place but there are no other assessments are being used to assess inmate job skills. There are job preparation activities within the Bridging Education Program Curriculum.
12.	Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (California Department of Corrections and Rehabilitation 151 form) that is up to date and accurate?	Yes	The Permanent Class Record Card (California Department of Corrections and Rehabilitation 151 form) that is up to date and accurate.
13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	No	The Bridging Education Program teacher does not have a posted written weekly schedule that includes student programs (to pick up or deliver corrected or new education material) and contacts (where and when teacher is outside the classroom). However, the teacher does use a ducat list to have inmates pulled out to participate in small or individual education activities in small groups in the bridging classroom.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

14.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Test of Adult Basic Education Testing Coordinator:</div> <p>Are gain/loss reports (School Progress Assessment Report Card) and the Test of Adult Basic Education sub-test reports reviewed/shared with the education supervisors?</p>	No	The Test of Adult Basic Education (TABE) coordinator was unfamiliar with this report.
15.	Does the Test of Adult Basic Education Coordinator and at least two others have access to a California Department of Corrections and Rehabilitation email address and user account?	No	Only the principal is the only education staff that has a user account.
16.	Does the Test of Adult Basic Education Coordinator have the most recent Test of Adult Basic Education database (within a week)?	No	The Test of Adult Basic Education database is down loaded from the Principal's computer and his user account to be transferred to the Test of Adult Basic Education computer.
17.	Are Test of Adult Basic Education testing protocols signed by current staff?	No	The Test of Adult Basic Education coordinator did not have a copy of the signed Test of Adult Basic Education test protocols.
18.	Are the Test of Adult Basic Education testing materials secured in a locked cabinet (mandatory standards)?	No	A portion of the Test of Adult Basic Education test materials are in the appropriate locked cabinet. Other Test materials are checked out to satellite areas throughout the institution. No approved exception request to the test security mandatory standards guidelines was found
19.	Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?	No	The Test of Adult Basic Education Coordinator has a computerized master inventory of the test books along with a hard copy, however, there was no inventory of the answer sheets.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

20.	Is the Test of Adult Basic Education binder current and up-to-date with memos, purchase orders and instructions?	No	The Test of Adult Basic Education binder was located but the last several memorandums were not in the binder and it was not current.
21.	Is the Test of Adult Basic Education locator test being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?	No	The Test of Adult Basic Education locator test was available and used periodically. Most teachers interviewed did not know about it or its purpose. Some teachers were aware of it but did not know they could use it. Part of the teachers assigned to test students never used the locator test.
22.	<div>Teacher-Test of Adult Basic Education Testing</div> Are teachers testing within 10 days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?	No	There were several student files that did not contain evidence of adherence to the ten days of the student's initial entry into the classroom testing requirement.
23.	Are the Test of Adult Basic Education tests administered according to the testing matrix?	No	Post Test of Adult Basic Education test results reported to Office of Correctional Education and student records do not provide evidence that the Test of Adult Basic Education tests administered according to the testing matrix.
24.	Is the Test of Adult Basic Education locator being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?	No	Teachers do not have access to and they are not using the test of Adult Basic Education locator test.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

25.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	No	Most teachers are using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates, others teachers are not. There are teachers who have not discussed test results with students.
26.	Are teachers using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?	No	Most teachers are using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates, others teachers are not. Teachers are also not reviewing the SPARC Report to trouble shoot subject areas that need improvement.
27.	Are current Test of Adult Basic Education subtests placed in student's file?	No	Most teachers have subtests placed in the student files others do not. There are many student files with outdated subtests results posted.
28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Alternative Education Delivery Models:</div> Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?	No	The Distance Learning teacher spends one hundred percent of her time working with corresponding college students; and not with the approved Office of Correctional Education curriculum classes.
29.	Are the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	No	The Distance Learning teacher is only working with college students. The position is funded for primarily approved Office of Correctional Education curriculum classes; such as Adult Basic Education I, II, III, General Education Development, high school, etc. Some minor college assistance is permitted (proctoring, etc). There are no funded positions for college programs.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis?	No	The Distance Learning teacher works primarily with the college program and does not coordinate any Literacy, Adult Basic Education, high school or General Education Development curriculum with the TV Specialist. However, the Kentucky Educational TV General Education Development series is shown on institutional TV by the TV Specialist on his own accord.
31.	Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs?	No	Again, this portion of the Alternate Education Delivery Model primarily serves college students. The teacher does offer half day tutoring on various yards; the inmates he tutors are educated. The teacher has not issued any Adult Basic Education I, II, III, High School or General Education Development certificates of completion.
32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	There is no education/work program currently operating at ISP.
34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	He is tutoring a half day on each yard; not using current CDCR curriculum or lesson plans. None of the students are assigned to him. Yet, he is maintaining PCR cards that he stated were being turned in monthly to the Principal.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	However, the Independent Study teacher only works with possible GED students. It is recommended that the program includes other OCE approved curriculum; for ABE III and High School subjects.
36.	<ul style="list-style-type: none"> Are teachers testing inmates within 10 days of being enrolled or assigned to an Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? 	No	Some teachers are testing, most are not. Common practice is to hold students until a teacher can test a group of students. This is not an approved practice.
37.	<ul style="list-style-type: none"> Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? 	Yes	
38.	Are students' gains being recorded and tracked?	Yes	
39.	Gender Responsive Strategies: Do all of the academic life skills classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM)(Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?	N/A	
40.	Do all of the academic life skills classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

41.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">ESTELLE and Behavior Modification Unit programs:</div> <p>Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance; and participation that allows a clear over-all rating of progress of each student in the Behavior Modification Unit/ESTELLE program?</p>	N/A	
42.	<p>Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?</p>	N/A	
43.	<ul style="list-style-type: none"> • Do ESTELLE students have access to computers as required in the framework of the program for training? • Does the teacher have Test of Adult Basic Education scores on all of the students in the program? 	N/A	
44.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment:</div> <p>Are assessment teachers conducting assessments on eligible inmates as defined by the current Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Operations Manual?</p>	N/A	
45.	<p>Does assessment staff utilize the current standardized Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Tracking Form?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

46.	Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with confidential document procedure?	N/A	
47.	Are assessment interviews conducted in a semi-private environment?	N/A	
48.	Is appropriate assistance provided to inmates during participation in the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	N/A	
49.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;">Security and Order:</div> Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?	No	One teacher did not have a whistle.
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	All classrooms have exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan
51.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;">Pre-Release</div> Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?	Yes	The teacher conducts Pre-Release classes on multiple yards on a rotational basis...

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

52.	Do all of the Pre Release lesson plans contain the objective, handouts, and methods for student evaluation?	Yes	
53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	Yes	
54.	Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?	Yes	
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	Yes	
56.	Is the Pre-Release class a full-time program (4 days/8.5 hours or 5 days/6.5 hours)? If no, is there an exemption on file?	Yes	
57.	Are all of California Department of Corrections and Rehabilitation 128-E's, completion chronos and classroom records current and accurate and reflecting a full quota student enrollment?	Yes	
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	Yes	
59.	Does the Pre-release teacher provide the Office of Correctional Education with monthly Pre-release reports on time and maintain copies of those Monthly Pre-release reports?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

60.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies Enhanced Outpatient Program Program:</div> <p>Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?</p>	NA	
61.	<p>Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?</p>	NA	
62.	<p>Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?</p>	NA	
63.	<p>Is there documentation of the education services provided to Enhanced Outpatient Program inmates?</p>	NA	
64.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Transforming Lives Network Program:</div> <p>Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transitional Living Network, institutional television, visual worksheets, etc.?</p>	Yes	<p>There are 23 available channels and 22 are operating. There is excellent signal distribution throughout the institution. The Television Specialist has been at ISP for eight months and has not received all the necessary equipment that is on its way to ISP from Office of Correctional Education.</p>

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	No	The Transforming Lives Network broadcasts are being used as well as Palo Verde College and Coastline College pre-recorded course Digital Video Disks (DVDs). However, there is no teacher input or individual access at this time. The TV Specialist is making progress in fully implementing the requirements. All of the equipment has not been received. The TV Specialist is in the process of developing a TV Studio.
66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	No	There is no broadcast schedule other than the Transforming Lives Network schedule. The Television Specialist is developing such a schedule as he makes progress in the full implementation of the services.
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	No	There is nothing developed or in place to provide for teacher input at this time. The Television Specialist is moving forward in developing and posting the schedule throughout the institution.
68.	<div style="border: 1px solid black; padding: 2px;">Recreation/Physical Education (P.E.):</div> Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?	Yes	
69.	Does the Physical Education teacher follow the California Department of Corrections and Rehabilitation approved selection process for movies?	Yes	
70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	No	The recreation teacher does not provide formal lessons. It is recommended that the physical recreation teacher provide some instruction in healthful living and the aging process to inmates on a planned schedule set for each yard.
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	Yes	
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	Yes	
74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	Yes	
75.	Are time-keeping records (California Department of Corrections and Rehabilitation Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	Yes	The recreation workers time is kept by the Recreation Officers.
76.	<div> Recidivism Reduction Strategies (Physical Education): </div> Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?	Yes	
77.	Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

NO.	INSTITUTION: ISP DATE: April 7-11, 2008 COMPLIANCE TEAM: Beverly Penland, Dale Manners	Yes/No or N/A	COMMENTS
1.	Student Job Description: Are all of the inmate students' job descriptions accurate, complete, signed, and available?	Yes	
2.	Student Records/Achievements: Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?	No	Some teachers did not have current Test of Adult Basic Education scores in the files. Several files had a copy of a General Education Development (GED) or a High School (HS) Diploma, but there was no verification as authentic or a copy of Test of Adult Basic Education scores as require for exemption from Test of Adult Basic Education testing.
3.	Are all of the California Department of Corrections and Rehabilitation 128-E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	Yes	
4.	Is the curriculum recording system in-use, accurate, and current?	No	Five programs were not using the current recording systems for a variety of reasons including the lack of equipment, required software, didn't like the new version, etc.
5.	Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time (on full days) for 4-10 programs?	No	The vocational programs often receive their students late due to a variety of reasons and were released early. The students often do not receive the 6.5 hours of contact time. The lost of instruction time can be up to one hour or more.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

6.	Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?	No	The teachers are unaware that credits can be issued.
7.	Are Trade/Industry Certifications being issued and recorded to those students earning them?	Yes	
8.	Are Certificates of Completion or Achievement as appropriate being issued and recorded for those students earning them?	No	A few of the teachers were unaware of when each type of certificates is issued and under what conditions. Most teachers however, were issuing the certificates appropriately.
9.	<div style="border: 1px solid black; padding: 2px;">Instructional Expectations:</div> Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?	No	Not all teachers had a course outline for their class. Several teachers had a good course outline for their classes and could be used as examples for the other teachers.
10.	Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?	No	Some of the teachers were using outdated curriculum and recording systems with outdated lesson plans. A couple of programs did not have lessons plans for their curriculum.
11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	No	A couple of teachers were not incorporating any literacy materials into lesson plans.
12.	Are Vocational Instructors conducting and documenting at least 4 hours of approved related formal classroom training each week for all inmate students?	No	A couple of the teachers were not documenting formal classroom training for their vocational trade.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

13.	<p>Are all of the vocational programs that have a nationally recognized certification programs participating in that program?</p>	No	<p>Only 9 computers are available for 27 students in each of the four Office Services' programs. Three of the programs do not have any of the software required to teach their program loaded on their 9 computers. The additional computers for these programs have been purchased and in the institution for over a year without being loaded with their software or placed in the classroom. One class has partial software loaded on its 9 computers. The only program on three of the Office Services classes is a typing program. Without the software and computers it is extremely difficult to provide vocation training for the inmates assigned to these programs. One of the classes with only the typing program is unable to save the student's typing lessons and tests. Additionally, ALL the teacher resource CD ROMs that were purchased with approved text books not allowed to be brought into the education classrooms. These read-only CD ROMs provide worksheets, teacher and learning resources and tests. The Office Service and Related Training Class teachers are waiting to receive Microsoft training necessary to issue Microsoft certification. The test software for Microsoft certification also needs to be loaded on the test computer for each program.</p>
14.	<div data-bbox="159 1650 907 1692" data-label="Section-Header"> <p>Recidivism Reduction Strategies:</p> </div> <p>Are the Recidivism Reduction Strategies programs issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

15.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">National Center for Construction Education and Research:</div> <p>Are all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?</p>	Yes	
16.	<p>Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?</p>	Yes	
17.	<p>Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?</p>	No	<p>Most of the National Center for Construction Education and Research vocational teachers do not have a staff computer to assist in generate the testing and documentation needed by the National Center for Construction Education and Research curriculum guide lines. In the Air Conditioning/Refrigeration class on "B" yard, 50 percent of the overhead lights are burned out. Most of the vocational classes have inadequate lighting in their shop areas. The lack of proper lighting could pose safety issues to staff and inmates when working with equipment and on projects.</p>
18.	<p>Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?</p>	Yes	
19.	<p>Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

20.	Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?	Yes	
21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	
24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to Office of Correctional Education within 60 days?	Yes	
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	
28.	<div>Test of Adult Basic Education TESTING</div> <p>Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?</p>	No	The teachers do not test their own students. A teacher is assigned to do the testing on each yard. The teacher waits until they have enough students before they are tested. The testing teacher's class is usually closed.
29.	Are the Test of Adult Basic Education tests administered according to the testing matrix?	No	Teachers advised that the Test of Adult Basic Education Coordinators notifies them which inmates need to be Test of Adult Basic Education tested. The teacher assigned to test will administer the pre or post Test of Adult Basic Education test when there are enough inmates to test.
30.	Is the Test of Adult Basic Education locator being used, when needed, to determine which level appropriate Test of Adult Basic Education test to administer?	No	Most teachers were unaware of what a Test of Adult Basic Education locator was or its use. Some test scores seem to indicate the inappropriate level Test of Adult Basic Education test was administered. By administering the Test of Adult Basic Education locator test the appropriate test level can be determined.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

31.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	No	The majority of teachers had copies of Test of Adult Basic Education subtests and reviewed the results with the inmates. Some teachers were unfamiliar with the Test of Adult Basic Education subtests and their purpose.
32.	Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes?	No	Most of the teachers did not use it to troubleshoot test score losses. Some of the teachers indicated they used the results to assist the inmates in areas they had difficulty in or for literacy needs. Others did not have copies.
33.	Are current Test of Adult Basic Education subtests placed in student's file?	No	Very few student files had copies of the Test of Adult Basic Education subtests. Most subtests were in a separate binder in the teacher's office. Some teachers did not have the subtest copies. They did not know they were to keep them.
34.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?	N/A	
35.	Do all or more of the vocational classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

36.	Security and Order: Are personal alarms issued by institution to instructors and do they wear a whistle and the personal alarms on their person?	No	Several teachers did not have a whistle. A couple of teachers said they had a whistle but did not have it with them.
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	No	A couple of teachers did not have an Inmate Safety Committee and no weekly safety inspections were conducted.
39.	Are at least one hour per month of safety meetings being held and documented?	No	A couple of teachers did not have documentation of any safety meetings.
40.	Trade Advisory Committee: Does the instructor have a documented Trade Advisory Committee that meets at least quarterly?	No	Several teachers have been trying to continue their contact with Trade Advisory Committee (TAC) members via the phone or after work hours. Other teachers had documentation from 2002-2003, while some had no documentation or TAC members.
41.	Job Market Analysis: Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?	No	Most teachers had a copy of the Employment Development Department Job Market Analysis or job market survey. A couple of teachers did not have a copy. One teacher had an outdated copy.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

42.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;">Apprenticeship:</div> <p>Is there an active Apprenticeship Training Program?</p>	Yes	
43.	<p>If there is an active Apprenticeship Training Program, do inmates meet apprenticeship requirements and receive pay?</p>	Yes	
44.	<p>Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?</p>	No	<p>No meeting has been held at the institution. The teacher, however, participates in several site apprenticeship functions and meetings on his own time.</p>
45.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;">Employee and Community Services Programs.</div> <p>If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?</p>	Yes	
46.	<p>If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

NO.	INSTITUTION: ISP DATE: April 7-11, 2008 COMPLIANCE TEAM: Christine Long	Yes/No or N/A	COMMENTS
1.	Library Staffing: <ul style="list-style-type: none"> Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff? Does the Senior Librarian implement/plan the library program? 	No	The school currently has a Library Technical Assistant working Out-of-Class as a Senior Librarian. A new-hire Senior Librarian has a report date of April 21, 2008.
2.	Department Operation Manual and Department Operation Manual Supplement: <ul style="list-style-type: none"> Is the current Department Operation Manual, Section 53060 available in main library (ies) and satellite library (ies)? Is there a Department Operation Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operation Manual supplement reflect the current, actual local library program? 	No	There are problems with referral to "Inmate Legal Assistant" (this inmate assignment does not exist) and a determination of 4 hours of access for Priority Legal Users. Also the listing of different categories for legal deadlines, and a determination to allow them two hours of access along with General Population users in the library procedures is not consistent with the requirements of the Department Operations Manual..
3.	General Population (GP) Access Hours: <ul style="list-style-type: none"> Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours? Do General Population inmates have regular access to non-legal library services? 	Yes	Library hours are posted on the window at each yard. There are no weekend or evening hours. There are approximately two hours each day the library is open to accommodate students and workers.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

4.	<div style="border: 1px solid black; padding: 2px;">General Population Law Library Documentation:</div> <ul style="list-style-type: none"> Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use. Is there a list showing inmates who request legal access, and those who received access? 	Yes	
5.	<div style="border: 1px solid black; padding: 2px;">Restricted Housing Status Inmate Access:</div> <ul style="list-style-type: none"> If there are Restricted Housing inmates in the institution, is there a Department Operation Manual supplement relating to their use of the library? Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request? 	Yes	
6.	<div style="border: 1px solid black; padding: 2px;">Restricted Housing Status Non-Legal Library Services:</div> <p>Do Restricted Housing inmates receive general library services?</p>	Yes	Boxes of fifty books (various titles and genre) are picked up and exchanged each month by the AdSeg Library Officer. If there is a specific title requested, the Central Library will fill the request, giving the book to the Correctional Officer for delivery.
7.	<div style="border: 1px solid black; padding: 2px;">Library Expenditures:</div> <ul style="list-style-type: none"> Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? If other items are purchased, are they for library use? 	Yes	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

8.	Inmate Welfare Funds (IWF) Expenditure: Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?	Yes	Education Department Inmate Welfare Fund ordering procedure for the libraries is in place.
9.	Law Library Expenditure: <ul style="list-style-type: none"> Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room? Are the Stock Received Reports completed and submitted to the Regional Accounting Office? 	Yes	LTA understands process. Inmate Clerk assigned to checking in materials along with staff supervision. A Memo SRR is used for tracking. Copies of the SRR are distributed by the Warehouse to Procurement.
10.	<ul style="list-style-type: none"> Are all received mandated law books and discs made available to inmates in a timely manner? Are the discs timely loaded on the Law Library Electronic Data System computer? Are the law books shelved promptly? 	No	There was a problem with the Associate Information Specialist Analyst prioritizing the library loading. The problem may have been resolved with the last updates.
11.	<ul style="list-style-type: none"> Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them? 	Yes	The warehouse notifies the Associate Information Specialist Analyst that the updates have arrived. The Associate Information Specialist Analyst then picks them up and loads them to the Legal Library Electronic Data System.
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	Yes	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

13.	Library Book Stock - Quality, Part I: <ul style="list-style-type: none"> • Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five (5) years and one unabridged dictionary (no older than 5 years); • Does the library program have at least three directories relevant to the questions asked by the population served? 	No	There is a need to order updated unabridged dictionaries and an updated Dictionary of Occupational Titles. The Directory of Attorneys is dated 2007, the Government Phone Book is dated 2007 and the HQ Headquarters Directory is dated 2006 and 2007.
14.	Library Book Stock - Quality, Part II: <p>Does each library in the institution have a current world almanac, an atlas that is no more than three (3) years old, an English language dictionary that is no more than five (5) years old, and a Spanish and English dictionary that is no more than ten (10) years old?</p>	No	The libraries need an updated Atlas, current editions are 2003. The Spanish/English Dictionaries to be updated prior to 2009, as well as the English language dictionaries.
15.	Library Book Stock - Quality, Part III: <ul style="list-style-type: none"> • Does each library regularly inspect the physical condition of their books? • Does the library program have a book repair procedure 	Yes	
16.	Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity: <p>Does each library in the institution have at least one (1) textbook and two (2) supplemental titles which have copyright dates not more than ten (10) years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials?</p>	No	The Minimum Support Facility library has very outdated vocational texts (i.e. Drafting), also needs additional high/low, academic and ethnic titles. All satellite libraries do not have current vocational texts.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

17.	Library Book Stock - User Orientation: <ul style="list-style-type: none"> Are book collections designed to meet the needs and interests of the inmate population served? Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box? 	Yes	Suggestion boxes are in each of the satellite libraries. There is a library representative for the IAC and for the MAC.
18.	Library Book Stock - Quantity: (Department Operation Manual Book Aug) <ul style="list-style-type: none"> Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding? 	Yes	
19.	Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?	Yes	Finished processing RRS books and have setup "Tracking of Use" procedure.
20.	Book Access: <ul style="list-style-type: none"> Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection? 	Yes	The inmates can use printed booklists which are available to inmates in binders. They can borrow from any one of the satellite and depository libraries; there is no outside Inter-Library Loan system.
21.	Circulation: <p>Is there an adequate library book checkout system in place and an adequate overdue system in use?</p>	Yes	Needs to be standardized for all libraries to use same system.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

22.	Mandated Law Library/California Code of Regulations, Department Operation Manual <ul style="list-style-type: none"> Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operation Manual? Are all the Law Library Electronic Data System computers up-to-date and operating in each library? 	No	All updates are received in the Central library. The libraries are waiting for new subscriptions to be processed by Headquarters for the Legal Library Electronic Data System.
23.	Law Library - American Disability Act (ADA): Are American Disability Act mandatory postings present in the library?	Yes	One wall in each satellite library dedicated to postings.
24.	Circulating Law Library: Is a procedure for accessing the Circulating Law Library in place?	Yes	(Institution Circulating Law Library from Central Library)
25.	Court Deadlines: Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?	Yes	Exception: The only access for the Minimum Support Facility is through paging or moving the inmate to another yard.
26.	Law Library Forms and Supplies: Do inmates have access to court required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

27.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">General Library Forms and Supplies:</div> <p>Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?</p>	Yes	
28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Inmate Clerk Training:</div> <ul style="list-style-type: none"> • Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? • Do inmate clerks receive training on a regular basis in law library and general library processes? 	Yes	<p>The clerks must have previous Clerk experience. They take a test for legal knowledge and are given training on the premises and are tested afterwards. They then receive a certificate of training. They are trained periodically on new library procedures, etc.</p>
29.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Security and Order:</div> <ul style="list-style-type: none"> • Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms? • Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan? 	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
Duty Statement/Job Description/Credentials – Literacy Learning Lab			
1.	Do you have a current duty statement on file (within one year)?	Yes	Mr. Halloran is a new PLATO Lab instructor.
2.	Do you have a valid credential on file?	Yes	Located in the Education Office.
Security/Order – Literacy Learning Lab			
3.	Are personal alarms issued by the institution to teaching staff and worn?	Yes	Plus Mr. Halloran has a whistle.
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	Exit sign over door with evacuation plans next to the door.
Supervisory/Support – Literacy Learning Lab			
5.	Do you receive support from your supervisor and other educational staff?	Yes	Excellent support
6.	Does the Vice Principal visit/observe your class? Does the Principal visit/observe your class? Do you maintain a sign-in log?	Yes	Ms. Baird visits daily and Mr. Stanley visits twice a month.
Inmate Enrollment – Literacy Learning Lab			
7.	Do you maintain a minimum enrollment of 27 students?	Yes	Twenty-seven students for 6.5 hours per day.
8.	Do students receive direct/group instruction?	No	Group work on board covering all subject areas. It is not a Literacy Learning Lab at this time because students have no use of the computers.
9.	Is the Literacy Learning Lab a "self contained" program?	No	It is not a Literacy Learning Lab at this time because student have no use of the computers
Student Records/Testing Achievements – Literacy Learning Lab			
10.	Do you verify non-GED or HS graduation of the student?	Yes	Call the Testing Coordinator to verify or have student fill out form for Transcript Request.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
11.	Do you start a student record file upon the student entering the Literacy Learning Lab program?	No	It is not a Literacy Learning Lab at this time because students have no use of the computers.
12.	Does each student have a current TABE score? <i>If not, do you refer the student for testing?</i>	Yes	Test of Adult Basic Education and Comprehensive Adult Student Assessment System scores are current. If the student's Test of Adult Basic Education score is not current, Mr. Halloran will test student.
13.	Do you assess student's basic skill level? <i>Describe</i>	Yes	Teacher interviews student and gives the student the San Diego Quick test to assess student skills.
14.	Are at least 90% of the CDC-128E's, classroom records and accountability documents current, accurate and secured?	Yes	All student files are current, accurate, and secured in locked cabinet.
15.	Are the Student Files current (incl. TABE and any assessment scores)? <i>Review</i>	Yes	All scores are current.
16.	Is there a current Student Job Description on file?	No	The Job Description did not reflect that the Literacy Learning Lab is designed for computer assisted learning. Students are unable to use the computers.
Instructional Expectations – Literacy Learning Lab			
17.	Do you use the approved CDCR Competency Based ABE curriculum?	No	Incorporated in student pencil/paper work. Students are unable to use the computers.
18.	Are differentiated instructional methods used? <i>Describe</i>	No	Reading and math groups work. Three groups going at one time. But not with the Literacy Learning Lab software.
19.	Do students track their own progress?	No	Students are unable to use the computers.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
20.	Do the students receive computer orientation? Is there continuous training? Describe	No	Literacy Learning Lab computers do not function to allow student use of the computer workstations.
21.	Do you maintain course outlines and lesson plans? Review files	Yes	Outlines and lesson plans being put together as the teacher (new to the position) progresses.
22.	Do you use alternative assessment instruments (besides the required TABE), to determine a student's instructional plan? Describe	No	Comprehensive Adult Student Assessment System only. The Literacy Learning Lab computers do not work to enable students' access to additional assessments.
23.	Do students spend an average of six months of instructional time enrolled in the program?	Yes	Six months to a year is the average.
Other Services – Literacy Learning Lab			
24.	Do you refer students to other services, i.e. medical? Describe the process	Yes	Teacher would have the Education Officer contact medical or send student to Housing Unit.
25.	Do you provide the students career-related information?	Yes	Job related activities, goal setting and other life skills.
26.	Do you have student aides? If so, how many and how are they used?	Yes	Three student aides. They provide tutoring and clerical support.
27.	Have you participated in conferences, workshops and seminars from July 1, 2007– December 31, 2008? If so, provide a list.	No	Mr. Halloran needs training on the PLATO, New Horizons and Reading Plus software.
Expenses – Literacy Learning Lab			
28.	Are spending levels appropriate for material purchases and training to support program needs?	Yes	
Equipment – Literacy Learning Lab			

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
29.	Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? <i>Conduct an inventory</i>	Yes	This PLATO Lab has new computers. This Literacy Learning Lab is not presently functioning for student use.
30.	Is your software appropriately maintained by PLATO's technical field staff?	Yes	Mr. Halloran is very happy with the PLATO the support from the PLATO Learning, Inc. However the software does not work under the present environment, which is not the fault of PLATO.
31.	Do you register all new software purchases with the Associate Information Specialist Analyst?	No	The Information Technology personnel have not supported the Literacy Learning Lab. The Literacy Learning Lab has not operated effectively for three years due to lack of Information Technology support at ISP. Reading Plus software purchased in August, 2007 is not installed in Literacy Learning Lab.
Committees/Meetings – Literacy Learning Lab			
32.	How often do you meet with the referral teacher for consultation on a student?	N/A	Students are assigned by Assignment Office.
CASAS/TOPSpro Management Information System (MIS) Coordinator			
33.	Have you been trained in the area of California Accountability and the TOPSpro Management Information System to appropriately perform your duties as a Comprehensive Adult Student Assessment System Coordinator? When was the date of the last training? <i>Dates of last trainings</i>	Yes	Mr. Baptiste attended the April 2007 and the October 2007 TOPSpro training conducted by the Workforce Investment Act Administrator. He also attended the 2007 Comprehensive Adult Student Assessment System Summer Institute.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
34.	Do you have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? <i>Explain the CASAS testing procedures at your institution.</i>	Yes	Adequate amount of testing materials. The teachers pick-up the testing materials in the Testing Office. Sign-Out/Sign In Sheet system is in place.
35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	Yes	Locked in cabinet in secured Hot Room within the Testing Office.
36.	Are you using the latest version of the TOPSpro Management Information System software?	Yes	TOPSpro version 4.6 Build 69.
37.	Is the hardware equipment (Scantron machine) and software (TOPSpro Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	Yes	The computer is in good shape. However the scanner is antiquated and it must be replaced by WIA funds. New scanners are on order.
38.	Do you provide each teacher with a Student Performance by Competency Report to assistance them in preparing lesson plans?	Yes	Competency Reports for Students and Class. Student Gains by Class Report is also given to the classroom teachers.
39.	Do you know how to generate the California Payment Point Report? Can you generate a Preliminary Payment Point Report?	Yes	Mr. Baptiste checks the Payment Point Report monthly. The Preliminary Report is also checked for cleaning data.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
40.	Are the appropriate students receiving and completing the Core Performance Surveys? <i>Explain the process in place to ensure that students are receiving the surveys.</i>	Yes	If the ex-student is still at the institution the Comprehensive Adult Student Assessment System Coordinator would send the survey to the ex-student to fill out and return to Coordinator via institution mail.
41.	Can you generate an up to date list of students that will be receiving the Core Performance Survey for the past quarter?	Yes	Second Quarter data showed "No Student Qualified".
42.	Can you generate a Data Integrity site review?	Yes	Data Integrity Report is used for assisting Coordinator to locate errors in the data.
43.	Can you generate a Student Gains by Class Report? Can you produce five student Entry/Update records and Pre/Post Test records? (Check reports with Student Gains by Class Report and Student Lister. Dates, testing books, and scores should match between records)	Yes	<p>This report is given to teachers and supervisors to account for the students learning gains.</p> <p>All records matched.</p>

COMMENTS:

As of this visit (February 27, 2008), the Literacy Learning Lab teacher is unable to enroll students, provide lessons or assessments with the PLATO software. The Literacy Learning Lab software has been restricted thus not allowing Mr. Halloran access to the programs. Mr. Halloran has no printer access to print reports for students when the software and hardware issues are resolved. These restrictions hinder his ability to utilize the PLATO software for its intended use. Thus the Literacy Learning Lab is merely an ABE program with no computer assisted learning as it is designated under Penal Code 2053.1, the Prisoner Literacy Act.

The Reading Plus software delivered to ISP in mid August of 2007 has not been installed.

COMPLIANCE REVIEW FINDINGS FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Mark Lechich	Yes/No or NA	COMMENTS
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The Literacy Learning Lab had about sixteen computers delivered and operating by April 10, 2008, the time of the Office of Audits and Compliance, Educational Compliance Branch visit.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS
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Inmate Enrollment					
1.	Is the class meeting the Office of Correctional Education required enrollment quota? (Note the actual enrollment in the comments section).	Yes	Prog. Quota Enrollment:		
			#1: 27 27		
			#2: 27 27		
			#3: 27 27		
Equipment Inventory					
2.	Is the Vocational and Technical Education Act equipment properly tagged? (Note the condition of equipment in the comments section).	Yes	Condition of equipment: New in all VTEA programs		
3.	Is Vocational and Technical Education Act equipment used for the intended purpose?	Yes			
Student Records/Testing Achievements					
4.	Are course completions being issued for OCE program training requirements? ▪ How many students are trained per year? (Note the number of students trained per year in the comments section).	Yes	Number of students trained per yr. Program #1: 40 #2: 80 #3: 50 Total: 170		
5.	Do Student files verify equipment training on California Department of Corrections and Rehabilitation Form 128E?	Yes			

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS																																		
6.	Is the Office of Correctional Education-approved curriculum and recording system in use?	Yes																																			
7.	Are lesson plans in accordance with OCE guidelines?	Yes																																			
Related Training																																					
8.	Is safety and literacy training taking place in accordance with OCE guidelines?	Yes																																			
Vocational Classroom Physical Access																																					
9.	Are students able to get physical access to the vocational shops over 50% of the time? (Note the "X" and "S" time for the last two prior months).	No	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="5">Over a two month period</th></tr> <tr> <th rowspan="2">Prog.</th><th colspan="2">1st month</th><th colspan="2">2nd month</th></tr> <tr> <th style="text-align: center;">X</th><th style="text-align: center;">S</th><th style="text-align: center;">X</th><th style="text-align: center;">S</th></tr> <tr> <td>#1:</td><td style="text-align: center;">1863</td><td style="text-align: center;">720</td><td style="text-align: center;">1847</td><td style="text-align: center;">1167</td></tr> <tr> <td>#2:</td><td style="text-align: center;">927</td><td style="text-align: center;">1018</td><td style="text-align: center;">1500</td><td style="text-align: center;">1418</td></tr> <tr> <td>#3:</td><td style="text-align: center;">2132</td><td style="text-align: center;">500</td><td style="text-align: center;">1504</td><td style="text-align: center;">1679</td></tr> <tr> <td>Totals</td><td style="text-align: center;">4922</td><td style="text-align: center;">2238</td><td style="text-align: center;">4851</td><td style="text-align: center;">2654</td></tr> </table>	Over a two month period					Prog.	1 st month		2 nd month		X	S	X	S	#1:	1863	720	1847	1167	#2:	927	1018	1500	1418	#3:	2132	500	1504	1679	Totals	4922	2238	4851	2654
Over a two month period																																					
Prog.	1 st month		2 nd month																																		
	X	S	X	S																																	
#1:	1863	720	1847	1167																																	
#2:	927	1018	1500	1418																																	
#3:	2132	500	1504	1679																																	
Totals	4922	2238	4851	2654																																	
Trade Advisory Committee																																					
10.	Are quarterly meetings held and minutes kept? (Note the Number of TAC members, number in the comments section).	No	Number of TAC members: Program #1: 5 #2: 2 #3: 0 Total members: 7																																		

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act
Vocational and Technical Education Act Grant

No.	INSTITUTION: ISP DATE: February 27, 2008 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS
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Supplemental Areas (not counted for points on the overall Compliance Review)			
11.	Apprenticeship: <ul style="list-style-type: none"> ▪ Number of apprentices_____ ▪ Institutional Pay_____ ▪ Union/Company Affiliation_____ _____ — ▪ Current DAS Form_____ ▪ OJT Work Logged_____ ▪ Less than 5 years_____ 	N/A	
12.	Is the shop clean? (Note the cleanliness and general maintenance of the shop in the comments section).	Yes	

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

INMATE
APPEALS

IRONWOOD STATE PRISON
APRIL 1 THROUGH APRIL 11, 2008

PRELIMINARY



CONDUCTED BY

INMATE APPEALS BRANCH

FINAL REPORT
INMATE APPEALS AUDIT

Ironwood State Prison
April 7-11, 2008

Review Team: M. Bunts, Correctional Counselor II, Chuckawalla Valley State Prison
D. Jacquez, Correctional Counselor II, Pelican Bay State Prison

SUMMARY CHART

AREA REVIEWED	RATING 2008	
	Score	Page No.
OVERALL RATING	91%	1
A. ACCESS TO INMATE APPEALS	100%	3-4
B. TRACKING/FILING APPEALS	99%	5
C. PREPARATION OF APPEALS	98%	6
D. TIMEFRAMES	88%	7
E. APPEAL RESPONSES	100%	8
F. SPECIALIZED PROCESSING OF APPEALS	100%	9-10
G. TRAINING and OFFICE STAFFING	50%	11
H. CURRENT OVERDUE APPEALS	92%	12

INMATE APPEALS AUDIT
FINAL REPORT

Ironwood State Prison
April 7-11, 2008

INMATE APPEALS AUDIT

The findings in this Inmate Appeals Audit resulted in an overall score of 91%. All areas and their results are listed below.

Dave Holbrook and N. Rivera assigned to the Appeals Office, are experienced and knowledgeable in all facets of the appeals process. The Appeals Office support staff, C. Sanchez, Office Technician and V. Lendway, Office Assistant, were helpful to the audit team. They were able to locate documents needed for the Review and provide information to assist the audit team. It was indeed a pleasure to work with all of the staff in the Appeals Office.

The specific sections and their corresponding questions and scores are identified below. Copies of the Inmate Appeals Worksheets are available upon request.

A. ACCESS TO INMATE APPEALS: Section Rating: 100

- 1) **Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate? [CCR 3084.1 (c)]**

25 sample # 25 # correct = 100%

Question Rating: 50

Score: 50

- 2) **Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and CDC Form 1824s in each inmate law library? [DOM Section 101120.11, 54100.3]**

4 sample # 4 # correct = 100%

Question Rating: 10

Score: 10

There was easy access to the forms and manuals in the law libraries. Law library staff were very helpful to the audit team.

- 3) **Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures? [CCR 3002(a)(2)]**

Yes/No

Question Rating: 20

Score:

20

- 4) Does the institution provide the orientation inmates verbal staff instruction regarding the inmates right to appeal and appeal procedures? [CCR 3002(a)(2)]

Yes/No

Question Rating: 20 Score : 20

SECTION POINT TOTAL 100

Recommendation: .

- 5) **Does the institution provide the CDC Form 602 in both English and Spanish?

Yes/No

Question Rating: 0 Score: 0

** Half of the housing units had English versions only.

B. TRACKING AND FILING APPEALS

Section Rating:

1. Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels? [DOM Section 54100.9]

Yes/No

Question Rating: 15 **Score:15**

2. A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached? [DOM Section 54100.3]

100 sample # 100 # correct = 100% Question Rating: 25 **Score:25**

3. Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days? [CCR 3084.5(i)]

20 sample # 19 # correct = 95% Question Rating: 25 **Score:25**

4. Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?
[CCR 3084.6, DOM 54100.12]

Yes/No

Question Rating: 35 **Score: 35**

SECTION POINT TOTAL 99

C. PREPARATION OF APPEALS

Section Rating 98

- 1) **Are inmates interviewed at the first level of review or at second level if first level is waived?** [CCR 3084.5 (f) and DOM 54100.14]

100 sample # 100 #correct = 100%

Question Rating: 25

Score: 25

- 2) **Do the dates on the appeal correspond with the dates on the IATS?**
[DOM Section 54100.9]

100 sample # 99 # correct = 99%

Question Rating: 25

Score: 25

- 3) **A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)?** [DOM Section 54100.3]

100 sample # 91 # correct = 91%

Question Rating: 25

Score: 23

- 4) **Is there evidence that appeal decisions are reviewed by the institution head or his/her designee?** ?[CCR 3084.5(e)(1)]

100 sample # 100 # correct = 100%

Question Rating: 25

Score: 25

SECTION POINT TOTAL 98

D. TIMEFRAMES

Section Rating: 88

- 1) **Are appeals being assigned at each level within five working days of receipt in the Appeals Office?** [DOM 54100.9]

100 sample # 92 # correct = 92%

Question Rating: 25

Score: 23

- 2) **Are informal appeals completed within ten working days?**
[CCR 3084.6 (b)(1)]

100 sample # 100 # correct = 100%

Question Rating: 25

Score: 25

- 3) **Are first-level responses completed within 30 working days?**
[CCR 3084.6 (b)(2)]

80 sample # 51 # correct = 64%

Question Rating: 25

Score: 16

- 4) **Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)?** [CCR 3084.6 (b)(3)]

100 sample # 95 # correct = 95_%

Question Rating: 25

Score: 24

SECTION POINT TOTAL 88

Recommendation: ADA and Staff Complaints comprised the majority of overdue at the first level of appeal review. More staff training and followup is recommended.

E. APPEAL RESPONSES

Section Rating: 100

- 1) **Does the institution prepare a written response at the first level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25 **Score: 25**

- 2) **Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered?** [CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25 **Score: 25**

- 3) **Does the institution prepare a written response at the second level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25 **Score: 25**

- 4) **Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered?**

[CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25 **Score: 25**

SECTION POINT TOTAL 100

F. SPECIALIZED PROCESSING OF APPEALS

Section Rating: 100

STAFF COMPLAINTS

APPEAL RESTRICTION

STAFF COMPLAINTS

- 1) When a staff complaint is filed against a Peace Officer, is notice given to that Peace Officer regarding the filing of the complaint? (Unit 6 Memorandum of Understanding, Section 9.09(D), Personnel Investigations, AB 05/03, DOM 54100.25.2)

Yes/No

Question Rating: 20 Score: 20

- 2) Is the institution keeping Staff Complaints for a period of five years? [DOM 54100.25.5 and Penal Code 832.5(b)]

Yes/No

Question Rating: 20 Score: 20

- 3) Are all allegations of staff misconduct presented to the warden or designee for determination of the type of inquiry needed? [AB 05/03]

Yes/No

Question Rating: 20 Score: 20

- 4) Are all allegations of staff misconduct presented to the warden or designee at least weekly? [AB 05/03]

Yes/No

Question Rating: 20 Score: 20

APPEAL RESTRICTION

- 5) Is there evidence of authorization from the Chief of the Inmate Appeals Branch (IAB) to place an inmate on restriction? [CCR 3084.4(3), (4)]

Yes/No:

100%

Question Rating: 20 Score: 20

SECTION POINT TOTAL 100



G. TRAINING/OFFICE STAFFING

Section Rating: 50

1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out? [DOM 54100.3]

Yes/No

Question Rating: 20 Score: 0

**There is no evidence that the Appeals Coordinator actively participates in Appeals training.*

2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation? [DOM 32010.10.2]

Yes/No

Question Rating: 30 Score: 0

3. Is there an updated Inmate Appeals lesson plan, which identifies recent changes in Department policy? [DOM 32010.8.4, 54100.3]

Yes/No

Question Rating: 30 Score: 30

4. If an inmate is assigned as a clerk in the unit, is he/she prevented from having access to the CDC Forms 602 at any level? [CCR Sections 3370(b) [component thereof]

Yes/No

Question Rating: 20 Score: 20

SECTION POINT TOTAL 50

H. CURRENT OVERDUE APPEALS**Section Total: 92**

1) What is the number of the current overdue First Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	12	.25	3
31-90 days	5	.50	2.5
91-180	1	.75	.75
181+	0	1	0

Question Rating: 50

Points deducted: 6.25

Score: 43.75

2) What is the number of the current overdue Second Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	4	.25	1
31-90 days	1	.50	.50
91-180	0	.75	0
181+	0	1	0

Question Rating: 50

Points deducted: 1.5

Score: 48.5

APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	1	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

of Appeals: 24

Points Deducted: 7.75

Score: 92.25

SECTION POINT TOTAL 92

ADDITIONAL AREAS OF REVIEW: This portion has been added to the audit format; however, these areas of the institution are reviewed for information gathering and scores will not be obtained.

1. Law Library access for ASU/SHU inmates:

- a) What is the process for allowing ASU/SHU inmates access to the law library?
[CCR 3122, 3160, 3164, 3343(k)]

There is an Administrative Segregation Unit (ASU) Library Officer who ensures that inmates receive access. In addition, there is a reserved area for ASU inmates.

- b) How often do these inmates have access to the law library?
There are no problems with inmate access except during the time of lockdowns and that is minimal.
- c) How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates? All inmates have adequate access and PLU inmates are allowed entrance into the law library first.

2. Medical Appeals Process:

- a) What is the process for answering medical and ADA appeals?

i) Who responds? The Health Care Appeals Coordinator (HCAC) responds at the Informal Level and the First Level. If the HCAC answers at the Informal Level, the yard physician then responds. The CMO/HCM responds at the Second Level of Appeal Review.

ii) Who interviews the inmate? The HCAC or the yard physician interviews the inmate.

iii) Who prepares the response? The HCAC prepares all of the responses.

- b) Talk to the CMO/HCM regarding medical appeals process.

All issues are reviewed by the CMO/HCM. The CMO/HCM is briefed by the HCAC concerning any medical issues. Additionally, there are daily meetings with the CMO/HCM and the yard physicians to ensure uniformity of practices and sharing of information.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION
BED UTILIZATION REVIEW

IRONWOOD STATE PRISON

APRIL 1 THROUGH APRIL 11, 2008

PRELIMINARY



CONDUCTED BY

CLASSIFICATION SERVICES

IRONWOOD STATE PRISON

April 7, 2008

ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

The **Ironwood State Prison** (ISP) Administrative Segregation Unit (ASU) Bed Utilization Review was conducted during the week of April 7, 2008 by Le Luu, Classification Staff Representative, Classification Services Unit; Boris C. Roberts, Classification & Parole Representative (C&PR), Chuckawalla State Prison; Don Perez, C&PR, Sierra Conversation Center; and James Govea, Correctional Counselor II, Avenal State Prison.

The purpose of this review is to provide an assessment of bed utilization in the ASU. This assessment is intended to be used as a management tool by the institution in identifying areas that could reduce time spent and overcrowding in ASU.

Attached to this report are computerized spreadsheets that contain the listing of the types of cases by CDC numbers that were reviewed by the team.

SAMPLE IDENTIFICATION

This ASU Bed Utilization review focuses on ISP cases that have been in ASU for 90 days or more as of the date the review began. Cases received at this institution for temporary ASU placement are not included in this review.

A total of **64** cases were reviewed. Of these cases:

- **47** were placed in Administrative Segregation based on a pending disciplinary charge.
- **12** were placed in Administrative Segregation based on a pending investigation of safety concerns/needs.
- **5** were placed in Administrative Segregation based on a pending investigation of Prison Gang Status or update of previous validation.

There were 14 cases in which the inmates received multiple Rule Violation Reports (RVR). The assessments of the processing time of these RVRs are being reported separately in the attached case listing spreadsheets to provide a clearer account of how each RVR was processed.

In addition, there was one (1) case in which the inmate was subjected to disciplinary actions and also under investigation for prison gang activities (V-42257). Due to the complexities of this case, the assessments of the processing time of the disciplinary

process and the prison gang validation process are documented separately in the case listing spreadsheets.

Does the institution use a comprehensive ASU tracking method that records the reason for ASU placement, track time periods for specific processes and total amount of time in ASU? Yes/No

Yes. The institution does have an ASU Tracking Log that contains a variety of data related to its ASU cases. One particular data field that was not included in the current tracking log is the CSR return date or the CSR action expiration date. However, the Reviewing Team has been advised that staff are in the process of examining this issue for possible inclusion of this data field in the future tracking log. It is important that staff update this log regularly and use the data contained therein to their full extent to ensure each case is processed promptly and expeditiously through ASU.

Comment: *Although there is not a requirement that a system other than the Distributed Data Processing System (DDPS) be maintained, the DDPS capabilities are limited. A comprehensive ASU tracking system can identify a multitude of data fields, which can be customized by the needs of each specific institution. The tracking system can be very basic but still provide meaningful information that can significantly reduce workload. The system should be maintained in a format that can be sorted by specific areas to enable staff to easily identify possible problem areas at a quick glance.*

GENERAL ASU CASE PROCESSING TIMES

Period from Initial Placement in ASU to CSR Review

California Code of Regulations (CCR) 3335(c)(1) requires that the Institution Classification Committee refers the case for Classification Staff Representative (CSR) review and approval when any case is retained in ASU for more than 30 days. When the initial ICC review determines that a case is not expected to be resolved within 30 days, referring the case to the CSR at the time of the initial hearing expedites this process and assures compliance with the regulation.

ASU Placement to Initial ICC review:

Time from the date of Administrative Segregation placement to the date of initial ICC referral for CSR Review ranged from **2** days to **14** days. The average time is **7** days.

[California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement.]

Initial ICC Review to CSR Review:

Time from the initial ICC referral for CSR Review to the actual CSR review ranged from **5** days to **256** days. The average time is **49** days.

[It is the expectation that cases referred for ASU retention be presented to the CSR for review within 30 days of the Classification committee referral.]

ASU Retention Beyond Approved Retention Date:

When an ASU case is reviewed by a Classification Staff Representative (CSR), the CSR will indicate a time period in which the case must be presented again to a CSR for further review. Of the cases reviewed, there are **29** cases (45%) currently retained in ASU beyond the CSR approved retention date. The average time that exceeds the CSR approved retention date is **16** days.

[The expectation is there should be 0 cases in this category]

ASU Retention Without ASU Extension Approval:

There are **5** cases that have been in ASU that do not have ASU extension approvals at all.

[The expectation is there should be 0 cases in this category]

DISCIPLINARY CASES

Hearing Timelines

Once a Rules Violation Report (RVR) has been issued, simply determining the time between the issuance and the subsequent hearing does not provide an accurate measurement of the institution's efficiency in processing the case. This is due to the fact that the inmate may choose to postpone the hearing until after any District Attorney review/prosecution has occurred. Due to this factor, RVR processing must be categorized and examined separately.

15 RVRs are still pending. **0** RVR was dismissed.

The average time the inmates have spent in ASU pending completion of the disciplinary process is **201** days.

RVRs heard without postponement

22 cases were examined.

Time from the date of issuance of the RVR to the date the RVR was heard ranged from **6** days to **93** days. The average time is **28** days.

RVRs heard with postponement pending DA action

17 cases were examined.

Time from the date of resolution of the DA referral delaying the hearing to the date the RVR was heard ranged from **0** days to **29** days. The average time is **19** days.

Post-Hearing Processing Timelines

Following the completion of the hearing by the disciplinary hearing officer or committee, there are no due process timeframes to interfere with rapid completion of the remainder of the disciplinary process. The time is measured from the hearing date through the ICC review. There are several reviews that must occur during this period. Each review is measured.

Hearing to Facility Captain Review:

Time from the date of the RVR hearing to the date the RVR was audited by the Facility Captain ranged from **1** day to **32** days. The average time is **11** days.

[The Department has no regulatory time constraints; however, the expectation is this time will be within 5 working days.]

Facility Captain to Chief Disciplinary Officer Review:

Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from **0** day to **23** days. The average time is **4** days.

[The Department has no regulatory time constraints; however, the expectation is this time will be within 3 working days.]

Chief Disciplinary Officer to ICC review:

Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from **2** day to **97** days. The average time is **25** days.

[The expectation is the inmate will appear before ICC within 14 days. This will allow staff a two-week ICC rotation period.]

Parole Violator Cases referred to the Board of Prison Terms (BPH) for review:

None of the cases reviewed required a referral to BPH for revocation extension hearing.

Incident Report Processing

Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the institution as it completes the report, forwards it to its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.

Note: The Reviewing Team obtained information pertaining to the DA referral process from the Central Files and, in most cases, from the Investigation Services Unit (ISU). In cases where the information from these two (2) sources was contradictory, the Reviewing Team used the information documented in the Central Files for the assessment of the processing time.

Incident Date to ISU Receipt of Incident Report:

Time from the date of incident occurrence to the date ISU received the Incident Report ranged from **2** days to **88** days. The average time is **20** days.

[The expectation is the complete package will be presented to ISU within 7 calendar days.]

ISU Receipt of Incident Report to Referral to DA/ISU Screenout:

Time from ISU receipt of the Incident Report to the date of DA referral or ISU screen out ranged from **1** day to **208** days. The average time is **52** days.

[The expectation is the time should not exceed 5 working days.]

DA Referral to Resolution:

Time from the date of DA referral to either rejection or acceptance of the case ranged from **2** days to **251** days. The average time is **65** days.

[This is one area that the institution has no definitive control over; however, it is suggested that the institution work closely with the DA's office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection.]

SAFETY CONCERNS

When an inmate is placed into ASU based on safety concerns, which must be investigated, there are no due process time constraints that delay the resolution and completion of the investigation. The amount of time taken to complete this type of investigation varies and generally reflects the amount of resources utilized to conduct the investigation.

There were **12** cases reviewed that were placed in Administrative Segregation based on the need for investigation of safety concerns. The average time the inmates have spent in ASU pending completion of such investigations is **164** days.

Investigation Initiation to Completion:

Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from **3** days to **96** days. The average time is **29** days.

[The expectation is this time should not exceed 30 calendar days.]

Investigation Completion to ICC Review:

Time from conclusion of the investigation to ICC review of investigation results ranged from **1** day to **99** days. The average time is **33** days.

[The expectation is that the inmate will appear before ICC within 14 calendar days. This will allow staff a 2-week rotation period.]

GANG INVESTIGATION/VALIDATION/DEBRIEFING

When an inmate is placed into ASU based on the need for investigation of gang activity, there are no due process time constraints, which delay the resolution and completion of the investigation. This timeline measures the amount of time taken to complete this type of investigation, the review by the Law Enforcement Liaison Unit (LEIU) and the time to review and conclude the issue by ICC and CSR.

There were **5** cases reviewed that were placed in Administrative Segregation based on Gang Investigation/Validation/Debriefing. The average time the inmates have spent in ASU pending completion of such investigation/validation process is **237** days.

ASU Placement to Referral to IGI for Investigation:

Time from the day of ASU placement to the investigation assignment being received by IGI ranged from **0** day to **70** days. The average time is **26** days.

(There was 1 case in which the investigation was initiated at the same time as ASU placement.)

Initiation of IGI investigation to Conclusion of Investigation:

Time from the day of IGI investigation assignment to conclusion of the investigation ranged from **15** days to **364** days. The average time is **135** days.

NUMBER OF INMATES IN ASU ENDORSED & AWAITING TRANSFER

Documentation presented by Records staff indicates that there are **14** ASU cases that are currently endorsed and awaiting transfer. These cases have been endorsed for transfer for **2** to **134** days. (At the time of completion of this report, the Reviewing Team was informed that the case that has been endorsed for transfer for 134 days has been assigned a bus seat for April 10, 2008.)

GENERAL OBSERVATIONS

The ASU Bed Utilization Review Team would like to thank all ISP staff for extending their warm welcome to the team. Special thanks are given to the C&PR, the Assistant C&PR, and Records staff in ensuring that the needed files were located and readily available to the Reviewing Team. This review could not have been completed in a timely manner without their cooperation and commitment to assist the Review Team in the many tasks requested.

As previously noted, attached to this report are case listing spreadsheets that contain data related to all the cases reviewed. This report examines and presents these data in separate case groups (i.e. Disciplinary, Safety Concerns Investigation, Prison Gang Investigation) in an effort to clearly identify areas of concern that may require re-evaluation of the processes currently in place. It does not, however, provide any specific direction and/or recommendations to change the current processes.

Overall, it is evident that ISP staff have consistently scheduled inmates for Initial ASU classification reviews within 10 days of their placements into ASU. Of the 64 cases reviewed, only four (4) appeared before ICC beyond the 10-day time parameter. However, these cases appear to be exceptions, rather than norms.

Additional efforts should be made, however, to ensure timely presentation or re-presentation of cases to CSRs. Of the 64 cases reviewed, approximately 31 (or 48%) were presented to CSR beyond 30 days from the date of initial ICC ASU retention review; 1 was presented to CSR almost 9 months after ASU placement; and 5 have not been presented to a CSR to date [between 4-7 months]. An additional problem is that cases

required to be returned to CSRs for further action(s) were not regularly returned to CSRs before the expiration of a specifically given return date. Of the cases reviewed, only 11 were re-presented to CSRs on or prior to the approved return dates and approximately 6 were re-presented to CSR beyond the approved return dates by approximately 3 to 4 months.

In the area of disciplinary process, it appears the information regarding an inmate's decision to postpone or not to postpone the hearing and the progress of the DA referral was not regularly documented in the CDC 128-Gs or in any other forms in the Central File. It would be beneficial to the classification review process if classification staff coordinate with ISU in obtaining information regarding the status of these cases for inclusion in the CDC 128-Gs.

Staff appeared to experience similar problems in the area of Safety Concern investigations. Information regarding the status of such investigations was rarely sufficiently documented in the CDC 128-Gs. The time taken to complete the investigations or to schedule ICC reviews following conclusion of the investigations may also have been an issue. Of the 12 Safety Concern cases reviewed, 4 (or 33%) required staff to spend between 44 to 96 days to complete the investigations and 3 (or 25%) appeared before ICC between 50-99 days following conclusion of the investigations.

Staff are encouraged to take necessary steps to ensure all areas of concern discussed in this report are addressed in accordance with applicable departmental policy and procedures.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screnout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
E29666	5	32	3/13/08	25	12/9/07	Possession of Weapon	No	6	4	7	97	N/A	N/A	N/A	5	N/A	N/A	N/A	120	
F07289(1)	7	25	4/4/08	3	11/1/07	Battery on Inmate with Weapon and/or SBI	Yes	75	9	13	15	N/A	N/A	N/A	26	22	N/A	N/A	158	Inmate received additional RVR while in ASU. Refer to the next entry for the processing time of this RVR.
F07289(2)	N/A	N/A	N/A	N/A	1/11/08	Battery on Inmate	No	14	11	8	8	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.
F20488	7	32	6/4/08	0	12/6/07	Possession of Weapon	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	16	Accept	123	Date of ISU receiving the Incident Package is not available.
F22673	4	61	11/29/07	130	8/19/07	Battery on Staff with Weapon and/or SBI	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	11	54	2	Accept	232	Case was to be returned to CSR if the inmate was not paroled on MAX EPRD. The inmate eventually went OTC and returned with additional time. Yet the case has not returned to CSR to date.
F25481	7	25	3/7/08	31	11/1/07	Battery on Inmate with Weapon and/or SBI	Yes	46	11	7	55	N/A	N/A	N/A	88	1	N/A	Screenout	158	
F32358(1)	7	151	N/A	N/A	11/1/07	Battery on Inmate with Weapon and/or SBI	No	31	10	6	23	N/A	N/A	N/A	84	6	N/A	Screenout	158	(1) Despite 5 ICC reviews since ASU placement, this case has NOT been presented to a CSR (Approx 5 months). The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date. (2) Inmate received an additional RVR while in ASU. Refer to the next entry for the processing time of this RVR.
F32358(2)	N/A	N/A	N/A	N/A	1/13/08	Battery on Inmate	Yes	27	19	3	18	N/A	N/A	N/A	N/A	N/A	N/A	Screenout	N/A	Assessment of the processing time for the RVR only.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenshot or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
F33157	9	130	N/A	N/A	11/20/07	Possession of Weapon	No	93	7	12	10	N/A	N/A	N/A	15	51	47	Accept	139	This case has NOT been presented to a CSR since ASU placement (Approx 4.5 months). The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
F35897	7	25	4/3/08	4	11/1/07	Battery on Inmate with Weapon and/or SBI	Yes	64	13	14	21	N/A	N/A	N/A	26	22	N/A	Screenout	158	
F46297	4	63	7/4/08	0	10/14/07	Battery on Inmate with Weapon and/or SBI	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	176	ISU is unable to confirm whether this case has been referred to the DA or screenedout. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
F47688	7	40	7/2/08	0	11/1/07	Battery on Inmate with Weapon and/or SBI	Yes	64	13	14	21	N/A	N/A	N/A	26	22	N/A	N/A	158	
F59361	7	40	3/7/08	31	11/1/07	Battery on Inmate with Weapon and/or SBI	Yes	75	9	5	31	N/A	N/A	N/A	26	22	N/A	Screenout	158	
F59867	4	159	5/30/08	0	10/14/07	Battery on Inmate with Weapon and/or SBI	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	67	109	N/A	N/A	176	(1) Case was reviewed by ICC on 10/18/07, 12/13/07, and 1/31/08; however, it was not presented to a CSR until 3/25/08 [over 5 months]. (2) The case has not been referred to DA or screened out. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
F60121(1)	10	25	4/24/08	0	10/1/07	Possession of Weapon	No	21	23	1	21	N/A	N/A	N/A	3	63	8	Reject	189	The RVR was ordered reissued/reheard by CDO. See the next entry for the processing time of the reissued/reheard RVR.
F60121(2)	N/A	N/A	N/A	N/A	1/8/08	Possession of Weapon	No	11	6	6	21	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the reissued/reheard RVR only.
F64576(1)	10	26	2/18/08	49	9/3/07	Battery on Staff	Yes	117	10	6	45	N/A	N/A	N/A	18	19	57	Reject	217	Inmate received an additional RVR dated 1/11/08 for Battery on Inmate. Refer to the next entry for the processing time of this RVR.
F64576(2)	N/A	N/A	N/A	N/A	1/11/08	Battery on Inmate	Not referred	12	13	9	14	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.
F65274	7	40	6/9/08	0	11/1/07	Battery on Inmate with Weapon and/or SBI	No	31	10	6	44	N/A	N/A	N/A	26	22	N/A	Screenout	158	
F71293(1)	6	138	N/A	N/A	11/15/07	Battery on Inmate with Weapon and/or SBI	No	12	3	2	4	N/A	N/A	N/A	15	61	N/A	Screened ou	144	(1) This case has NOT been presented to a CSR since ASU placement (>4.5 months) despite ICC reviews of 11/21/07, 12/6/07, 1/31/08, and 3/13/08. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date. (2) Inmate received an additional RVR dated 1/14/08 for Battery on Inmate. Refer to the next entry for the processing time of this RVR.
F71293(2)	N/A	N/A	N/A	N/A	1/14/08	Battery on Inmate	Not referred	11	11	8	29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.
J07088	9	24	7/2/08	0	12/25/07	Battery on Inmate with Weapon and/or SBI	Unknown	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	103	ISU is unable to provide the information regarding the DA referral process.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments	
J20982(1)	9	27	6/27/08	0	8/7/07	Conspiracy to Commit Drug Distribution	Yes	87	13	0	14	N/A	N/A	N/A	33	35		Screenout	230	Inmate received an additional RVR while in ASU. Refer to the next entry for the processing time of this RVR.	
J20982(2)	N/A	N/A	N/A	N/A	12/28/07	Battery on Inmate with SBI	Yes	75	6	0	20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of the processing time for the RVR only. (2) Case has not reviewed by ICC following adjudication of RVR. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
J22044	8	26	3/19/08	19	12/12/07	Possession of Weapon	Unknown	Pending	N/A	N/A	N/A	N/A	N/A	N/A	9	108	N/A	N/A	117	ISU is unable to confirm whether this case has been referred to the DA or screenedout. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.	
J28832	7	17	7/31/08	0	10/12/07	Participation in a Riot	Not referred	35	14	0	7	N/A	N/A	N/A	N/A	N/A	N/A	N/A	178		
J87662(1)	4	26	6/13/08	0	4/22/07	Battery on Inmate with Weapon and/or SBI	No	27	3	2	46	N/A	N/A	N/A	N/A	N/A	101	Accept	351	(1) ISI was unable to confirm the date of receipt of the Incident Package. (2) The RVR was reissued/reheard. Refer to the next entry for the processing time of this RVR.	
J87662(2)	N/A	N/A	N/A	N/A	8/23/07	Battery on Inmate with Weapon and/or SBI	No	35	25	1	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.	
K21416(1)	10	26	5/28/08	0	5/14/07	Battery on Staff with SBI	No	39	32	0	23	N/A	N/A	N/A	23	8	251	Accept	329	The RVR was reissued/reheard. Refer to the next entry for the processing time of this RVR.	
K21416(2)	N/A	N/A	N/A	N/A	10/24/07	Battery on Staff with SBI	No	41	7	0	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.	
P30536	6	55	4/22/08	0	7/27/07	Attempted Murder of Inmate	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	26	N/A	N/A	N/A	255	Information on DA referral is not available.	

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
P61146	6	5	12/1/07	128	11/20/07	Battery on Inmate	No	37	1	3	24	N/A	N/A	N/A	21	83	N/A	Screenout	164	(1) Inmate was originally placed in ASU pending investigation into allegations of Battery on Inmate. He was issued a RVR for this charge on 11/20/07. (2) Despite subsequents ICC reviews of 11/29/07 and 1/24/08, this case has not been returned to a CSR. The approved return date is 12/1/07.
P70050(1)	2	19	3/26/08	12	12/25/07	Battery on Staff	No	12	19	4	N/A	N/A	N/A	N/A	2	34	8	Reject	104	The RVR was ordered reissued/reheard by CDO. See the next entry for the processing time of the reissued/reheard RVR.
P70050(2)	N/A	N/A	N/A	N/A	1/29/08	Battery on Staff	No	8	14	23	24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of the processing time for the reissued/reheard RVR only. (2) Case has not reviewed by ICC following adjudication of RVR. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
P71205	7	109	5/30/08	0	5/4/07	Battery on Staff	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	25	14	N/A	Pending	158	
P81566	10	18	4/18/08	0	4/24/06	Attempted Murder of Staff	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	9	86	202	Accept	714	
P87534	10	33	3/12/08	26	12/3/07	Battery on Staff	No	16	14	1	28	N/A	N/A	N/A	14	11	N/A	Screenout	126	
T20237	5	32	3/15/08	23	9/28/07	Battery on Inmate with SBI	Yes	31	4	3	25	N/A	N/A	N/A	11	22	49	Accept	191	
T31109(1)	5	19	4/9/08	0	1/5/08	Possession of Weapon	No	15	4	5	2	N/A	N/A	N/A	45	13	N/A	Screenout	93	Inmate received an additional RVR dated 1/15/08 for Battery on Inmate. Refer to the next entry for the processing time of this RVR.
T31109(2)	N/A	N/A	N/A	N/A	1/15/08	Battery on Inmate	Not referred	26	5	3	10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
T42867	7	26	5/15/08	0	11/1/07	Battery on Staff	No	30	3	1	15	N/A	N/A	N/A	8	25	23	Accept	158	

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments	
T46613	6	82	3/19/08	19	10/24/07	Battery on Inmate with Weapon	Yes	48	24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		0	157	(1) ICC Intitial ASU retention hearing was complete on 11/8/07. However, this case was not presented to CSR until 1/29/08, after ICC had completed the subsequent review on 1/10/08. (2) The CDO review of the RVR was not dated. (3) ISU was unable to provide information on the DA referral process.
T47851	6	54	6/4/08	0	10/19/06	Battery on Staff with SBI	No	42	22	0	41	N/A	N/A	N/A	4	46	N/A	Pending		535	THis RVR was ordered reissued/reheard on 3/21/07 and is still pending adjudication due to inmate's postponement of the hearing pending outcome of the DA referral. Projected MERD is 8/12/08.
T51713	8	110	4/2/08	5	7/11/07	Battery on Inmate with Weapon and/or SBI	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	13	190	5	Reject		271	Initial ASU retention review was complete on 7/19/07; however, this case was not presented to CSR. It was later prestented to CSR based on subsequent ICC review of 10/11/07.
T71606	7	12	4/2/08	5	12/25/07	Possession of Weapon	Yes	29	6	2	21	N/A	N/A	N/A	3	28	59	Accept		102	
V04668	9	24	7/2/08	0	12/25/07	Battery on Staff with Weapon and/or SBI	Unknown	Pending	N/A	N/A	N/A	N/A	N/A	N/A	13	22	N/A	Screenout		103	
V07005	11	12	3/6/08	32	11/26/07	Possession of Weapon	No	Pending	N/A	N/A	N/A	N/A	N/A	N/A	3	40	N/A	Screenout		133	(1) Per CDC 128-G of 3/13/08, the RVR was adjudicated on 12/22/07; however, the adjudicated RVR was lost. The CDO may order the RVR to be reissued/reheard. (2) The inmate received additional RVR of 3/24/08 for Attempted Murder of Inmate, which is still pending.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenshot or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
V20900(1)	8	109	1/0/00	N/A	12/12/07	Battery on Staff	Yes	72	14	0	31	N/A	N/A	N/A	9	35	21	Reject	117	(1) This case has NOT been presented to a CSR since ASU placement (Approx 4 months). The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date. (2) ICC has not reviewed this case following adjudication of the RVR. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date. (3) Inmate received an additional RVR dated 12/12/07 for Possesssion of Weapon. Refer to the next entry for the processing time of this RVR.
V20900(2)	N/A	N/A	N/A	N/A	12/12/07	Possession of Weapon	Yes	72	14	3	28	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of the processing time for the RVR only. (2) Case has not reviewed by ICC following adjudication of RVR. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
V32743(1)	10	18	5/30/08	0	4/26/06	Attempted Murder of Staff	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	7	85	203	Accept	714	Inmate received additional RVRs while in ASU. Refer to the next entries for the processing time of these RVRs.
V32743(2)	N/A	N/A	N/A	N/A	9/16/06	Battery on Inmate	No	30	4	3	38	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.
V32743(3)	N/A	N/A	N/A	N/A	1/15/08	Battery on Inmate	No	31	10	3	39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of the processing time for the RVR only. (2) Case has not reviewed by ICC following adjudication of RVR. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
V37935	6	27	2/24/09	0	8/24/07	Battery on Inmate with Weapon	Yes	83	12	0	2	N/A	N/A	N/A	12	36	N/A	Pending	227	SHU term approved with MERD of 2/24/09.
V39799	11	12	4/26/08	0	11/26/07	Possession of Weapon	No	26	6	3	66	N/A	N/A	N/A	3	112	11	Reject	133	

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenshot or Referral	Days from referral to DA Accept/Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
V42257	9	33	3/12/08	26	2/28/08	Drug Distribution	Unknown	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	111	N/A	N/A	125	(1) ISU is unable to confirm whether this case has been referred to the DA or screenedout. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date. (2) Inmate was placed in ASU pending investigation into Drug Distribution. The Incident Package was sent to ISU prior to the issuance of the RVR. (3) On 3/11/08, a new CDC 114-D was issued re: prison gang validation. The assessment of the processing time for the gang validation process is documented separately on the spreadsheet for Gang.
V46207	4	19	3/26/08	12	12/23/07	Possession of Weapon	Unknown	Pending	N/A	N/A	N/A	N/A	N/A	N/A	17	71	N/A	Pending	106	
V56707(1)	10	33	3/16/08	22	11/2/07	Participation in a Riot	Not referred	41	5	1	22	N/A	N/A	N/A	N/A	N/A	N/A	N/A	154	Inmate received an additional RVR while in ASU. Refer to the next entry for the processing time of this RVR.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenshot or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments	
V56707(2)	N/A	N/A	N/A	N/A	1/15/08	Battery on Inmate	Not referred	26	5	7	34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of the processing time for the RVR only.
V70313(1)	4	26	5/28/08	0	10/25/07	Drug Distribution	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	208	N/A	N/A	N/A	211	(1) ISU is unable to confirm whether this case has been referred to the DA or screenedout. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date. (2) Inmate received an additional RVR while in ASU. Refer to the next entry for the processing time of this RVR. (3) INmate was placed in ASU and ISU received the Incident Package prior to the issuance of the RVR.
V70313(2)	N/A	N/A	N/A	N/A	12/28/07	Battery on Inmate with SBI	Yes	75	6	0	20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of the processing time for the RVR only. (2) Case has not reviewed by ICC following adjudication of RVR. The date of this ASU Bed Utilization review (4/7/08) is used to calculate the processing time to date.
V71677	6	40	5/2/08	0	8/24/07	Battery on Inmate with Weapon and/or SBI	Yes	83	12	0	2	N/A	N/A	N/A	12	36	47	Accept	227	The inmate is being retained on active MERD of 5/2/08 pending cour proceedings.	
V95006	7	27	3/6/08	32	8/23/07	Possession of Weapon	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	228	Information regarding DA referral is not available.	
AVERAGE	7	45	N/A	32				42	11	4	25				20	52	65		201		

SAFETY

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Days to Completion of Investigation	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation	Days in ASU to date	Comments
C08768	7	256	4/1/08	6	6/28/07	20	50	193	284	ICC reviews were complete on 7/5/07, 7/26/07, 9/6/07, 11/29/07, and 2/28/08; however, this case was not presented to CSR until 3/17/08 [Almost 9 months from ASU placement].
E63755	14	23	3/12/08	26	7/12/07	N/A	87	32	252	The investigation apparently started before ASU placement.
F38024	7	138	N/A	None	11/14/07	6	1	138	145	This case has not been referred to CSR since ASU placement or since completion of the Safety investigation. The date of this ASU Bed Utilization review [4/7/08] is being used to calculate the processing time to date.
F62456	8	27	2/28/08	39	6/6/07	0	8	27	306	Investigation was complete on the same date of ASU placement.

SAFETY

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Days to Completion of Investigation	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation	Days in ASU to date	Comments
F67159	9	111	7/1/08	0	12/4/07	3	6	111	125	(1) Inmate was placed in ASU for being the victim of an assault. ICC action of 12/13/07 completed the Initial ASU retention review and recommended alternate GP placement; however, this case was not actually presented to CSR until 4/2/08, after it had been reviewed again by subsequent ICC action of 2/29/08 based on inmate's request for SNY placement.
F70499	10	33	1/2/08	96	11/5/07	44	12	98	154	Despite ICC review following completion of the investigation on 12/31/07, this case has not yet been referred to a CSR. The date of this ASU Bed Utilization review [4/7/08] is being used to calculate the processing time to date.
F87051	5	68	3/5/08	33	12/22/07	0	5	68	107	Initial ASU retention review was complete on 12/27/07; however, this case was not presented to CSR. It was later prestented to CSR based on subsequent ICC review of 2/21/08.

SAFETY

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Days to Completion of Investigation	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation	Days in ASU to date	Comments
H73461	4	109	1/0/00	N/A	12/20/07	53	22	N/A	113	ICC reviews were complete on 12/20/07, 2/29/08, and 3/20/08; however, this case has not been referred to CSR since ASU placement. The date of this ASU Bed Utilization review [4/7/08] is being used to calculate the processing time to date.
J84702	8	54	3/30/08	8	1/2/08	96	N/A	N/A	96	(1) Case was also reviewed by subsequent ICCs of 2/14/08 and 2/22/08 prior to being referred to CSR on 3/4/08. (2) The investigation is still pending. The date of this ASU Bed Utilization review [4/7/08] is being used to calculate the processing time to date.
P80126	7	12	1/20/08	78	12/6/07	25	99	N/A	130	Following CSR action of 12/18/07 with a return date of 1/20/08, this case was seen again by ICC on 12/21/07; however, it has never been returned to CSR for follow-up action(s). The last ICC action was 4/1/08 per CDC 262.
T10409	4	27	7/31/08	0	12/16/07	53	22	17	113	0

SAFETY

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Days to Completion of Investigation	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation	Days in ASU to date	Comments
V49824	11	46	1/30/08	68	11/30/07	15	52	73	140	The case has not been presented to CSR following completion of the investigation. The date of this ASU Bed Utilization review [4/7/08] is being used to calculate the processing time to date.
AVERAGE	8	75		44		29	33	126	164	

GANG

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	If ASU extension is expired, how many days	Days from ASU Placement To Investigation Assignment being Received by IGI/Staff	Days to Completion of Investigation	Days from Completion of Investigation by IGI to LEIU For Validation	Days from referral to LEIU to Receipt of 128B-2	Days in ASU to date	Comments
C13243	9	26	6/4/08	0	N/A	364	2	Pending	391	Gang investigation started prior to ASU placement. The date of ASU placement is used to start the assessment of the processing time.
K28788	9	33	3/26/08	12	8	15	0	69	209	
K85874	6	5	4/23/08	0	70	Pending	N/A	N/A	164	The investigation is still pending.
T37563	6	11	4/11/08	0	0	84	10	9	185	
V42257	N/A	N/A	N/A	N/A	N/A	78	6	41	N/A	(1) Inmate was originally placed in ASU on 12/4/07 for Drug Distribution. On 3/11/08, a new CDC 114-D was issued addressing prison gang validation. He was seen by ICC on 3/13/08, but the case has not been presented to CSR [<30 days]. For information related to the disciplinary process, please refer to the Disciplinary spreadsheet. (2) The prison validation process was complete prior to the issuance of the CDC 114-D of 3/11/08.
AVERAGE	8	19		12	26	135	4.5	40	237	

SUMMARY

	DISCIPLINARY	SAFETY	GANG	TOTAL AVERAGE
AVG: 114D TO ICC	7	8	#REF!	#REF!
AVG: ICC TO CSR	45	75	#REF!	#REF!
AVG: EXT EXPIRED	32	36	#REF!	#REF!
RVR				
AVG: RVR TO HEARING	42	N/A	N/A	42
AVG: HEARING TO CAPT REV	11	N/A	N/A	11
AVG: CAPT REV. TO CDO	4	N/A	N/A	4
AVG: CDO TO ICC	25	N/A	N/A	25
BPT				
AVG: RVR TO BPT DESK	0	N/A	N/A	0
AVG: BPT DESK TO BPT	0	N/A	N/A	0
AVG: BPT TO OFFER/HEARING	0	N/A	N/A	0
837				
AVG: INCIDENT TO ISU (RECEIVE 837)	20	N/A	N/A	20
AVG: ISU TO REFERRAL/SCREENOUT	52	N/A	N/A	52
AVG: REFERRAL TO DA REJECT/ACCEPT	65	N/A	N/A	65
INVESTIGATION				
AVG: COMPLETION OF INVEST	N/A	29	N/A	29
AVG: INVEST TO ICC	N/A	33	N/A	33
AVG: ICC TO CSR	N/A	88	N/A	88
IGI				
AVG: PLACEMENT TO ASST. REC'D IGI	N/A	N/A	#REF!	#REF!
AVG: COMPLETION OF INVEST	N/A	N/A	#REF!	#REF!
AVG: COMP. INVEST TO LEIU FOR VALIDATION	N/A	N/A	#REF!	#REF!
AVG: LEIU REFERRAL TO 128B2 RECEIPT	N/A	N/A	#REF!	#REF!
AVG: TOTAL ASU SINCE INITIAL	201	163.76923	#REF!	#REF!

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

RADIO
COMMUNICATIONS

IRONWOOD STATE PRISON
APRIL 1 THROUGH APRIL 11, 2008

PRELIMINARY



CONDUCTED BY

TELECOMMUNICATIONS

Review of Radio Communications

IRONWOOD STATE PRISON, BLYTHE

Introduction

This review of Radio Communication Operations at Ironwood State Prison, Blythe (ISP) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Reviews and Compliance and the Radio Communications Unit (RCU), between the dates of April 7 through 11, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM), State Administrative Manual (SAM) and Administrative Bulletin (AB) 90/35 as the primary sources of operational standards.

This review was conducted by Shelly Hutchens, Project Manager, of the Facilities Planning and Management Division, Telecommunications Section, Radio Communications Unit.

The review consisted of an on-site inspection, interviews with staff, reviews of procedures, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations as applied to Public Safety Communications. Each area was reviewed with staff and any problems were reviewed or solved with the ISP Radio Liaison. Overall, findings presented in the attached report represent the consensus.

Review of Radio Communications

Ironwood State Prison, Blythe

REVIEW SCOPE AND METHODOLOGY

The CPRB and the RCU conducted an on-site review at ISP during the period of April 7 through 11, 2008. The purpose of this review was to assess the level of compliance with established State regulations in the areas of Public Safety Communications. This review and the attached findings represent the formal review of ISP's compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to ISP's staff in advance of the review.

A random sample of radios were reviewed, checking the Radio as to the Post Assignment, the Department of General Services (DGS) 'S' number and the radio serial number. Utilizing the inventory, matrix and AB 90/35 to prove the proper radio location, ISP was at 100% on radio placement.

Recommendations are to continue normal practices as ISP has no issues with usage of the 800 MHz Trunked Radio System and all ISP staff are following all required Public Safety Standards.

The Reviewer would also like to complement the Radio Liaison at ISP (Sergeant Pierce) as his organizational skills and overall help made this review a success.

Radio Communication Compliance Review
Ironwood State Prison, Blythe (ISP)
Exit Conference Discussion Notes
April 11th, 2008

The Office of Audits and Compliance (OAC) and the Radio Communication Unit (RCU) conducted a Radio Communications Security Compliance Review of ISP the week of April 7th, 2008. The review covered 28 different areas which ISP was fully compliant in the 20 areas that were applicable to the institution. The chart below details these outcomes. Other observations are noted below.

FINDINGS SUMMARY:

		Compliant	Partial Compliance	Non Compliant	Not Applicable
1	Radio Liaison Identified?	C			
2	Inventory System in Place?	C			
3	All Radios Accounted for?	C			
4	Radio Matrix in place?	C			
5	Repair Procedure?	C			
6	Repair Tracking?	C			
7	Battery Management in Place?	C			
8	Proper usage of Battery Management?	C			
9	Inmate Access to Radios?	C			
10	Radio Vault Secured?				See note # 1
11	Intrusion Alarm on Radio Vault?				See note # 1
12	Authorization to Enter Vault?				See note # 1
13	Key to Vault Secured?				See note # 1
14	Vault key Access for DGS-TD Tech?				See note # 1
15	System Watch/SIDR Operational & Computer Secured?				See note # 2
16	Procedure to Operate System Watch/SIDR?	C			
17	Staff to Operate System Watch/SIDR identified?	C			
18	System Watch/SIDR Training?				See note # 2
19	Chit System in Place for Radios?	C			
20	Other Radios on Grounds?	C			
21	Scanners on Grounds?	C			
22	Who do you contact for System Malfunction?	C			
23	Steps taken when System Fails?	C			
24	Staff have Knowledge on Radio Fail-Soft?	C			
25	Staff have Knowledge of RCU Staff?	C			
26	Off Grounds Communication / Fire Department.	C			
27	Working CLERS System?				See note # 3
28	Working CMARS System?	C			
Total		20		0	8

CVSP and ISP share the same radio system. The major components of the radio system such as the vault and System Watch and SIDR are located at CVSP. In the event that ISP needs access to those components, the Radio Liaison will contact the CVSP Radio Liaison or the local DGS technician.

Note 1: The radio vault is located at CVSP. All access and security measures are monitored and maintained by the CVSP Radio Liaison. There are procedures in place if ISP needs to gain access.

Note 2: The System Watch/SIDR computer is located at and operated by the CVSP Radio Liaison.

Note 3: There is not a working CLERS System due to there not being a DGS Microwave drop in the area.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

CASE RECORDS

IRONWOOD STATE PRISON
APRIL 1 THROUGH APRIL 11, 2008

The seal of the California Department of Corrections and Rehabilitation is a circular emblem. It features a green outer ring with the text "DEPARTMENT OF CORRECTIONS AND REHABILITATION" at the top and "STATE OF CALIFORNIA" at the bottom, separated by two gold stars. The center of the seal depicts a golden scale of justice and a map of California.

PRELIMINARY

CONDUCTED BY

CASE RECORDS ADMIN

IRONWOOD STATE PRISON COMPLIANCE REVIEW

Correctional Case Records Services lead a four member team comprised of Kathy Moore, Correctional Case Records Administrator, Pam Webster, Correctional Case Records Manager, Pleasant Valley State Prison, Mary Swiegert, Correctional Case Records Manager, CSP-Solano and Sylvia Fowler, Correctional Case Records Manager, Chuckawalla Valley State Prison to conduct a compliance review April 7 - 11, 2008 of specific areas within the Ironwood State Prison records office.

Administrative staff and the Correctional Case Records Manager were aware of this review in advance and all staff was cooperative and assisted with providing information to the review team when requested.

The two primary areas reviewed were:

1. Holds, Warrants and Detainers (HWD)
2. Warden's Checkout Order (CDC 161)

An overview of the findings in the review process is outlined in this document.

This review consisted of 51 Central Files of recently paroled inmates and 12 additional Central Files for HWD purposes for a total of 63 Central Files reviewed.

HOLDS, WARRANTS AND DETAINERS (HWD)

Reference: DOM Section 72040.5 & 72040.5.1 & 72040.5.3 & CR 97/04

"The HWD system ensures that information regarding any specific or potential detainer is recorded and called to staff attention within four hours of receipt to determine what effect, if any, the hold might have on an inmate's custody."

"The HWD Coordinator shall prepare letters of inquiry or initiate teletype requests to resolve potential holds based on the CDC Form 850s completed by institution staff and complete necessary follow-ups on any communication received from law enforcement agencies. The CDC Form 850 shall be attached to the top of the detainer section of the Central File and all such actions shall be entered in the HWD log."

"The HWD Coordinator's initial request to obtain information shall be completed within two working days and follow-up at the 60-day and 10-day audits prior to release. Telephonic follow-up should be used at the 10-day audit."

"If a detainer exists or is believed to exist on an inmate, the HWD coordinator shall prepare a CDC Form 850 documenting the pertinent facts, and immediately contacting the designated staff person responsible for evaluating the potential detainer..."

IRONWOOD STATE PRISON COMPLIANCE REVIEW

“Release Prior to Parole. It is imperative that when an inmate is released prior to their parole date, pursuant to Penal Code Section 4755, that a CDC Form 801, Detainer, accompanies the inmate to ensure that he/she remains in custody until his/her actual parole date.”

Desk Procedures for the HWD clerical staff were reviewed. Clerical staff were interviewed and state they refer to their desk procedures frequently. They explained verbally the processes they are familiar with and when necessary they review procedures for those processes they are still learning.

Time frames for placing active holds, warrants and detainers for the most part appear to be in compliance, however, of the 63 cases reviewed there was one case, where the warrant was faxed in on 3/17/2008, at 12:03 pm, and it wasn't placed into OBIS until 3/18/2008, at 11:44 pm (per the CDC850 in file).

V63061 Martinez

Of the 63 Central Files reviewed, 8 cases was found not in compliance with DOM Section 72040.5.1, where the letter of inquiry was not forwarded to the law enforcement agency within the 2 working days of receipt of the CDC 850.

F37474 Conner

V09012 Yepiz

V70536 Rios

P72815 Alvarez

F85066 Sierra

F85031 Martinez

F91209 Hampton

F44000 Snow

The Detainer or Warrant is given to the agency when the inmate is picked up and a copy is retained in the Central File. Of the 63 cases reviewed, in one case it does not appear that the CDC 801, Detainer was given to the agency picking up the inmate prior to his release date. 'S' was released to the U.S. Marshall on 3/24/08, with a parole date of 3/26/08.

T17370 Ontiveros

The inmate is notified of the detainer via the CDC 661 Detainer Memorandum. Of the 63 files reviewed, one case had a CDC 661 informing the inmate that a warrant had been placed from Las Vegas Metro Police Department; however the

IRONWOOD STATE PRISON COMPLIANCE REVIEW

placing agency was Clark County District Court. They issued a bench warrant for FTA. Subsequently, the KCHD information was not accurate.

Holds are dropped from KCHD when inmates are paroled to a hold. Of the 51 parole cases reviewed, there were 11 cases that paroled to a hold and after review of the KCHD system it was noted that none had been removed/deleted from the system.

V63061 Martinez
V26995 Rojas
F78386 Henderson
F84486 Orduna
F04071 Ray
T17370 Ontiveros
F36478 Ruelas
V45340 Zepeda
F21334 Ocampoduarte
P55421 Chhing
F64822 Sanchez

WARDEN'S CHECKOUT ORDER (CDC 161)

Reference: DOM Section 74070.3

"...Paperwork and routine dress-out procedures on cases with release date on weekends or holidays shall be completed prior to the weekend or holiday."

"Prior to release of the inmate, records office staff shall prepare the CDC Form 161, Warden's Checkout Order, and arrange distribution as required by institution operations."

Reference: DOM Section 74070.21

"The following data shall be typed on the CDC Form 161:

- Date of Release*
- Type of Release*
- CDC number*
- Commitment name*
- Controlling Discharge Date*
- Name of parole unit and county of residence*
- Parole Region*
- Check off section to indicate that PC Sections 3058.6 and 3058.8 notifications have been sent.*

"The CDC Form 161 shall be typed by clerical staff. As part of the prerelease audit, the release of information on the form shall be verified at a level not less than that of a Case Records Analyst as the form is used by the institution as the

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source document for OBIS input and therefore, its accuracy determines the accuracy of parole information in OBIS”.

Reference: Instructional Memorandum (CR 01/14)

“...The CDC Form 161, Warden’s Check-out Order, shall indicate that a notice was sent pursuant to the applicable notification requirement...”

“...the Warden’s Checkout Order must include a notation above the Case Records staff’s signature block which states PC 3058.6 and/or PC 3058.8 has been complied with or that PC 3058.6 and/or PC 3058.8 is not applicable.”

Reference: Instructional Memorandum (CR 99/69)

“... Early/Late Release Reports should be prepared at the time of discovery and forwarded to Case Records, central office within a few days”.

Desk Procedures for the Parole desk clerical staff were reviewed. Clerical staff were interviewed and state they refer to their desk procedures frequently. They explained verbally the processes they are familiar with and when necessary they review procedures for those processes they are still learning.

Central files were reviewed for inmates/parolees who were released from Ironwood State Prison during the preceding three weeks of the review.

There were 51 cases reviewed and the overall findings are as follows:

Information on the Warden’s Checkout Order is not consistent with the desk procedures. The desk procedures state *“not to put release to parole or revocation to release on the CDC161.”* Of the 51 files reviewed, 39 Warden’s Checkout Order reflected one or the other of these statements. This was discussed with the Parole Clerk and her Supervisor, who stated they were not aware of this direction in their desk procedures.

*This information is not required or necessary as the release status, i.e. parole, discharges, etc. and the type of release is already reflected on the CDC 161.

The Early/Late Release Report is promptly submitted to Case Records Services. In reviewing the early/late releases with the Case Records Manager, there were 3 cases where the reports have not been forwarded to Case Records Services in a timely manner. Two reports were dated 12/15/07 and one dated 2/1/08.

IRONWOOD STATE PRISON COMPLIANCE REVIEW

The Warden's Checkout Orders are to include a check in the boxes for the notices pursuant to PC 3058.6, PC 3058.8, etc., or N/A if not applicable. This procedure is not being followed. Of the 51 cases reviewed none reflected N/A when not applicable.

There was one case that the Parole Region information was incorrect on the CDC 161.

F85882 Basurto

There was one case that the inmate's name was misspelled on the CDC 161. The CDC 161 reflected the name as Hymann and should have been Hyman.

K47333 Hyman

General Findings

In the Holds, Warrants and Detainer portion of the audit, 19 components were reviewed. There were five areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- Time frames between initiating the CDC 850 and forwarding the inquiry to the appropriate law enforcement agency are not within guidelines.
- Time frames for placing active holds and warrants into the KCHD system do not meet Departmental policy and procedures.
- There is no documentation of the CDC 801 being prepared and given to the agency when picked up prior to the inmate's release date.
- The appropriate agency issuing the warrant is not listed on the CDC 661.
- Holds are not being dropped in the KCHD system after the inmate is released on parole.

Recommendations:

- On the job training should be provided and documented for the Correctional Case Records Analyst, Correctional Case Records Supervisor, Office Services Supervisor, clerical staff and Program Technicians to ensure appropriate OBIS entries and information is recorded accurately on the CDC-161 Warden's Checkout Order.
- Ensure desk procedures are current and consistent.
- Provide training to the Program Technician's (PT's) and Supervisor over the PT's for removing holds in the KCHD for inmate's that have paroled.
- Provide training for the staff responsible for entering warrant information into the KCHD system.

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- Provide training for the appropriate staff who are responsible for sending out the Letter of Inquiry and ensure this process is reflected in the desk procedure.
- Ensure compliance with Departmental procedures and DOM Sections 72040.5, 72040.5.1, 72040.5.3, and CR 97/04.

General Findings

In the CDC Form 161 Warden's Checkout Order portion of the audit, 3 components were reviewed. There are four areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- The Notices Sent Pursuant to PC 3058.6, PC 3058.8, etc., on the CDC Form 161 Warden's Checkout Order need to include N/A, not applicable for those that do not apply.
- The desk procedures are not consistent with the current practices.
- The early/late release reports are not being submitted in a timely manner.
- Information on the CDC 161 is not being verified for accuracy.

Recommendations

- On the job training should be provided and documented for the Correctional Case Records Analyst, Correctional Case Records Supervisor, Office Services Supervisor, clerical staff and Program Technicians to ensure compliance with Departmental policy and procedure.
- Ensure desk procedures are current and consistent.
- Ensure compliance with submittal of the early/late release reports in compliance with Departmental policy and procedure (CR 99/69)

STAFF VACANCIES

The vacancies are reported as follows:

One Correctional Case Records Supervisor

One Office Services Supervisor I

Three Office Technicians – One of these positions is the C&PR Secretary.

Six Office Assistants (Typing)

EXTENDED SICK LEAVE

One Program Technician is on extended medical leave